

Harley-Davidson Road King Special FLHRXS in Midnight Blue

RAFFLE TICKET REQUEST FORM



Name _____

Address _____

City _____ State _____ Zip _____

Phone (H) _____ (W) _____

Email _____

Leg Leader _____

Leg # _____

Number of Tickets Requested _____

.....

For Office Use Only

Date form was received _____

Date tickets were sent _____

Sent by _____

Number of tickets sent _____