

MRAAA ~ 2024 Lottery Calendar Purchase Form

<p>Each calendar has a three-digit number on it and this number is good for every day of 2024. Cash prizes are awarded each day according to the amount of money listed on the calendar. Winning numbers are determined by the first three-digit PA Pick 3 evening number held at 7:00 pm.</p> <p style="text-align: center;">Purchaser Information</p> <p>Name: _____</p> <p>Address: _____</p> <p>City, State Zip: _____</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Total Amount Owed: _____</p>	<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th colspan="2">Price Chart</th> </tr> <tr> <th>Quantity</th> <th>Amount owed</th> </tr> </thead> <tbody> <tr><td>1</td><td>\$27.00</td></tr> <tr><td>2</td><td>\$54.00</td></tr> <tr><td>3</td><td>\$81.00</td></tr> <tr><td>4</td><td>\$108.00</td></tr> <tr><td>5</td><td>\$135.00</td></tr> <tr><td>6</td><td>\$162.00</td></tr> <tr><td>7</td><td>\$189.00</td></tr> <tr><td>8</td><td>\$216.00</td></tr> <tr><td>9</td><td>\$343.00</td></tr> <tr><td>10</td><td>\$270.00</td></tr> </tbody> </table>	Price Chart		Quantity	Amount owed	1	\$27.00	2	\$54.00	3	\$81.00	4	\$108.00	5	\$135.00	6	\$162.00	7	\$189.00	8	\$216.00	9	\$343.00	10	\$270.00
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Credit Card #: _____ Exp. Date: _____

SCG06942

Please fill out and mail in, if you would like to email this form, please call us with your credit card.

Make Check Payable to: Clearfield County Area Agency on Aging, Inc.
Mail to: 600 Cooper Rd, Curwensville, PA 16833
Phone (814) 765-2696 ~ Email form to: rvaughn@matureresources.life

<p style="text-align: center;">Calendar #1</p> <p>Name: _____</p> <p>Address: _____</p> <p>City, State Zip: _____</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Requested #: _____</p>	<p style="text-align: center;">Calendar #2</p> <p>Name: _____</p> <p>Address: _____</p> <p>City, State Zip: _____</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Requested #: _____</p>
<p style="text-align: center;">Calendar #3</p> <p>Name: _____</p> <p>Address: _____</p> <p>City, State Zip: _____</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Requested #: _____</p>	<p style="text-align: center;">Calendar #4</p> <p>Name: _____</p> <p>Address: _____</p> <p>City, State Zip: _____</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Requested #: _____</p>
<p style="text-align: center;">Calendar #5</p> <p>Name: _____</p> <p>Address: _____</p> <p>City, State Zip: _____</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Requested #: _____</p>	<p style="text-align: center;">Calendar #6</p> <p>Name: _____</p> <p>Address: _____</p> <p>City, State Zip: _____</p> <p>Phone: _____</p> <p>Email: _____</p> <p>Requested #: _____</p>

PLEASE CHOOSE PICKUP LOCATION: CLEARFIELD ___ OR CURWENSVILLE ___

If you live out of town and require calendars to be mailed, please let us know where they need to be mailed.