



T R O Y • F E S T
— celebrating the arts —

Jean Lake Purchase Program

Name : _____

Address : _____

Email: _____

Phone: _____ *Amount: _____

Check Enclosed Send Invoice

* For the amount of TroyFest Bucks you would like to receive minus the 10%

Office Use Only

Check # _____

Invoice Date _____

Award Ribbon TF bucks