



**MAJOR PURCHASE RECEIPT**

Company Name: \_\_\_\_\_

Representative Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Customer Name: \_\_\_\_\_

Item Purchased: \_\_\_\_\_

Date of Purchase: \_\_\_\_\_

Purchase Amount: \_\_\_\_\_

Signature of Representative: \_\_\_\_\_

Complete this form and either:

1. Scan and send the form to John Tolson at [John@simichamber.org](mailto:John@simichamber.org), or
2. A member of the Chamber staff will pick up completed forms on Monday, December 12 by Noon.

For more information or to print more forms, visit [www.simichamber.org](http://www.simichamber.org) or scan the QR code

Simi Valley Chamber of Commerce Parking Lot 40 W. Cochran St.

**THANK YOU !**



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