

The ODA Foundation continues to award more funds each year for grants and scholarships. Help us continue to make an impact! All proceeds benefit the ODA Foundation to advance oral health in Ohio.

W First Prize **W** \$10,000 cash prize **WW** Second Prize **WW** 2026 Tripartite Membership dues paid or the equivalent in cash **Ticket Prices** \$100 per ticket 3 for \$250

6 for \$500 A maximum of 700 tickets will be sold.



DRAWING HELD Saturday, Sept. 27, 2025 in the Annual Session Exhibit Hall

The ticket price is not deductible for Federal or State income tax purposes. Non-dentists are eligible to participate. Call 800-282-1526 for complete rules and restrictions.



Raffle Ticket Order Form ODA Foundation 1370 Dublin Road Columbus OH, 43215 www.oda.org

Fax completed form to (614) 486-0381 or mail to ODAF at address listed above. Mailed order forms must be received at the Foundation office by Sept. 19, 2025.

Each ticket purchased offers a chance to win one of two great prizes to be drawn at the ODA Annual Session on Saturday, September 27, 2025. Winners need not be present to win.

Name:	ADA #:
Address:	
City/State/Zip:	
Office Phone:	Cell Phone:
Ticket Quantity:	Ticket Numbers:
Individual Ticket: \$100	
3-pack of Tickets: \$250	
6-pack of Tickets: \$500	
Total Purchase Amount: \$	
Form of Payment: Check Enclose	sed Check Number:
□ Visa □ MasterCard □ [Discover 🗆 AmEx
Card Number:	
Expiration Month/Year:	3-digit security code:
Name as it appears on card:	
Billing Address:	
Billing City/State/Zip:	
Ticket Seller Name:	