

REFLECTIVE ADDRESS MARKER ORDER FORM

Please complete the following information:



Name _____
Address _____
City, ST, Zip _____
Phone Number _____

Address Number Requested

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Note: If address has fewer than 5 digits, please "X" those boxes not used.

HORIZONTAL

Address Marker Format & Mounting Preference

- Vertical sign** – Mounted on a post: **Yes** - \$25 donation **No** = \$20 donation*
- Vertical Double-Sided** – Mounted on a post: **Yes** - \$25 donation **No** = \$20 donation
- Horizontal sign** - \$20 donation

Do you need us to install the sign?

- Yes** **No**

Return order form with donation to:

**Anderson Island Fire/Rescue
12207 Lake Josephine Blvd.
Anderson Island, WA 98303**

*Cash or Check accepted. Please make checks out to: **Anderson Island Firefighters' Association or AIFA**