

REFLECTIVE ADDRESS MARKER ORDER FORM - \$20



Name _____

Address _____

City _____

State _____

Zip _____

Phone # _____



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ADDRESS NUMBER REQUESTED
(IF YOUR ADDRESS HAS LESS THAN FIVE DIGITS "X" OUT BOX.)

Mounting Preference

_____ Horizontal
_____ Vertical

L-Bracket Package Available: **\$3.00/pkg**
(This is for alternate mounting methods.)
Package includes: 2-brackets, 4 nuts, and bolts

COST OF MARKER:

ADDRESS MARKER	_____ X	<u>\$20</u>	\$	
L-BRACKET PACKAGE	_____ X	<u>\$ 3</u>	\$	

TOTAL COST **\$** _____

MAIL TO:

**Citizen's Fire Company
Vera Cruz District # 28
Upper Milford Fire Departments
4093 Main Road West
Emmaus, PA 18049**

**Upper Milford Western Dist. Fire Co. # 1
Zionsville District # 19
Upper Milford Fire Departments
PO Box 302
Old Zionsville, PA 18068**

MAKE CHECKS PAYABLE TO: **Upper Milford Fire Departments**

PLEASE ALLOW 2 – 4 WEEKS FOR DELIVERY

FOR MORE INFORMATION:

<http://www.veracruzfirecompany.com> or <http://www.uppermilford.net>

E-mail: info@veracruzfirecompany.com