

REFLECTIVE ADDRESS MARKER ORDER FORM

Please complete the following information:

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

Street Address/House Number Requested

Note: If your address has fewer than 5 digits, please place an X in boxes not used.

Mounting Preference

HORIZONTAL:

VERTICAL:

HORIZONTAL

SIGN IS 6" X 18" WITH
4" REFLECTIVE
NUMERALS BOTH SIDES

**V
E
R
T
I
C
A
L**

Installation available for Effingham Sr. Citizens

**ONLY
\$20***

*** ADD \$5 FOR MAIL
OR YOU CAN PICK UP
AT EFFINGHAM
TOWN OFFICE**

**MAKE CHECKS PAYABLE TO:
Effingham Firefighters Association**

**MAIL TO:
Effingham Firefighters Association
1102 Province Lake Road
Effingham, NH 03882**