

Reflective Address Marker Order Form

Please complete the following information:

Name: _____

Address: _____

City, State, Zip: _____

Phone Number: _____

Address Number Requested

Mailbox Sign 6"x18"

Green w/ white

\$15

House Sign 5"x14"

White

\$15

Please mail orders to:

West Sand Lake Fire Company

PO Box 539

West Sand Lake, NY 12196

Checks payable to West Sand Lake Fire Company