

Sunman Rural Fire Department REFLECTIVE ADDRESS MARKER ORDER FORM



Please complete the following information and mail to the address below

Name:			
Address:			
City:	State:	Zip:	
Telephone Number	;		
	Price: \$10. Qty: X \$10.00		
Please	e make Checks payable to:	Sunman Rural Fire D	Department, Inc.
Please send Order Form and Check to:		Sunman Rural Fire Department, Inc. P.O. Box 396 Sunman, Indiana 47041	
•	ou mail at a P.O. Box, you d put an address sign on it.		• • •
Note: Reflective Address Markers may be purchased for local pickup only.			
	Please complete the i		
1. A	Address Numbers:		
2. N	Tumbers on Both Sides:	Yes No	
3. C	Green/ White Numbers	Blue/ White Numbers	White/ Green Numbers (4 or less numbers only)
4. C	Prientantion: Horizonta 1 2 3 4		