

SMITH VALLEY VOLUNTEER FIREFIGHTERS

REFLECTIVE ADDRESS MARKER ORDER FORM

Please complete the following information:

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

Address Number Requested

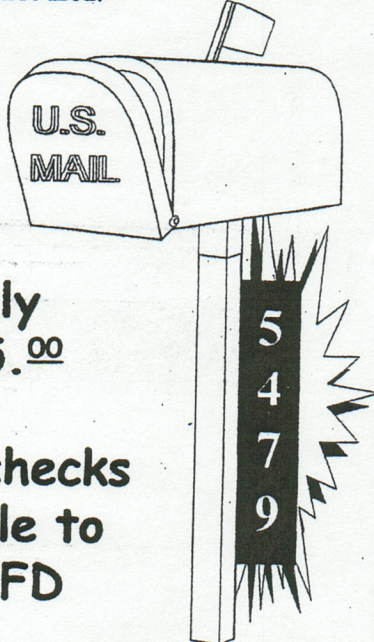
Note: If your address has fewer than 5 digits, please X those boxes not used.

Mounting Preference

HORIZONTAL _____
VERTICAL _____

HORIZONTAL

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



Only
\$15.⁰⁰

Make checks
payable to
SVVFD

Mail to:
SMITH VALLEY FIRE
ONE HARDIE LANE
SMITH, NV 89430

For Faster Service, Please Call: 775-465-2577