ADDRESS SIGN REQUEST FOR SEAL ROCK FIRE DISTRICT (PLEASE PRINT)

Name:			
Site address: (Might need discu	ssing)		
Mailing address: (if different)			
Phone #: Day:	Evening:		
Quantity: One @ \$25.00	Two @ \$50.00	Total:	
Payment is by cash or check on	y. ·		
(Note: The placement of the sig	n(s), on your property,	could take 4-6	weeks,
after your order is processed.			Sale -
Signature:	Date:		- 790
If you have any questions, please call (541) 563-4441			A some
Mail to: Seal Rock Fire District			<u>. U</u>
10349 NW Rand St.			and a
Seal Rock, OR. 97376			MC.
			man 1
For office use only			
Assigned to	Order taken by _		5
Date	Date paid		
Completed date	Cash	or Check #	