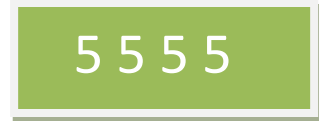


REFLECTIVE ADDRESS SIGNS



\$10.00 each

Mail this form along with a check made payable to:
Jackson Township Trustees
3263 U S Route 50
Williamsburg, OH 45176

Name: _____

Address: _____

City: _____ **State** _____ **Zip** _____

Address Number to Appear on Your Sign: _____

Note: Signs are numbered on both sides

Telephone number for township to call to make arrangements for pickup or delivery of sign(s):

(____) - _____ - _____

IMPORTANT:

- **Please circle top of this page direction of sign required: Vertical or Horizontal**

Note Available to “Jackson Township Residents only”