



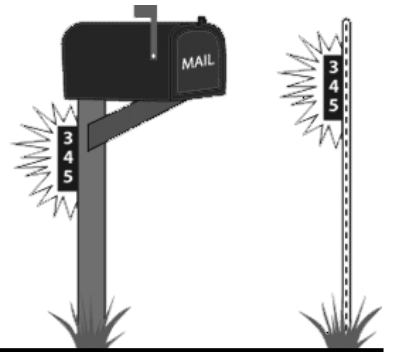
**If we can't find you...
We can't help you.**

**Order your blue, reflective
address marker today.**

Only \$15

It may help save your life or someone you love.

CGH Ambulance Reflective Address Marker Order Form



Please complete the following information:

Name: _____

Address: _____

City, State, ZIP: _____

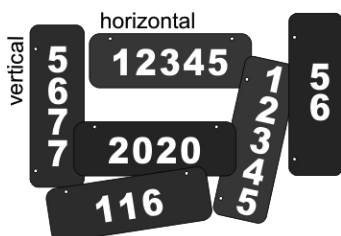
Phone Number: _____

Address Number Requested:

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

Mounting Preference *(circle one):*

Horizontal Vertical



**All proceeds will benefit the CGH
Ambulance Community Services Core Group**

Send checks, made payable to
CGH Medical Center, with order form to:

CGH Medical Center

Attn: Pre-Hospital Department

100 E. LeFevre Rd, Sterling, IL 61081

Questions? Please call: (815) 564-4949, opt. 4