

ST. SIMONS ISLAND
VOLUNTEER FIRE DEPARTMENT
St. Simons Island, Ga. 31522



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL
FIRST CLASS PERMIT NO. 407 ST. SIMONS ISLAND, GA.

POSTAGE WILL BE PAID BY ADDRESSEE

ST. SIMONS ISLAND
VOLUNTEER FIRE DEPARTMENT
P.O. Box 20836
ST. SIMONS ISLAND, GEORGIA 31522



CONTRIBUTOR

19 _____



NAME _____

ADDRESS _____

KEEP THIS STUB AS YOUR RECEIPT

ST. SIMONS ISLAND VOLUNTEER
FIRE DEPARTMENT
P.O. Box 20836
ST. SIMONS ISLAND, GA. 31522

Enclosed is remittance of \$ _____
to aid in the community service you are performing.
() Check () Money Order () Cash

Signed _____

Your contribution is
tax deductible