

Emergency Kit Order Form

Name _____

Address _____

Phone _____



$$\text{\$ } 13.50 \times \underline{\hspace{2cm}} = \text{\$ } \underline{\hspace{2cm}}$$



$$\text{\$ } 25.00 \times \underline{\hspace{2cm}} = \text{\$ } \underline{\hspace{2cm}}$$



$$\text{\$ } 35.00 \times \underline{\hspace{2cm}} = \text{\$ } \underline{\hspace{2cm}}$$



$$\text{\$ } 105.00 \times \underline{\hspace{2cm}} = \text{\$ } \underline{\hspace{2cm}}$$

$$\text{Shipping} = \text{\$ } \underline{\hspace{2cm}} *$$

$$\text{Total:} \quad \text{\$ } \underline{\hspace{2cm}}$$

*(Note – call for shipping costs if out of the Carnation-Duvall area)

Mail your check made out to CDCCC to:
Carnation-Duvall Citizen Corps
P.O. Box 644
Carnation, WA 98014

For questions call 425-788-8260 or email info@carnationduvallcitizencorps.org