

### Order Form for District Directory

Yes, I would like to order a District Directory.

Please send \_\_\_\_\_ copy(ies) to the following address. I have enclosed a check in the amount of \$3 for one Directory or \$5 for two, **made payable to the Colonial District**.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

*Lynda Grass, Publisher  
Colonial District Directory  
511 Grant Street  
Charleston, WV 25302*

*Your payment goes directly to the District treasury; no funds are kept by the Publisher.*