

League of Women Voters of Lane County
380 Q Street, Suite 250
Springfield, OR 97477
541-343-7917

LWV / VOTE 411 MASK Order form

Number of masks ordered, limit four: _____

Name: _____

Mailing address: _____

Phone: _____

Masks will be mailed unless you specify* that you will pick up your order from the LWVLC office during office hours (Mon., Wed., Friday, 11:00 – 1:30). Shipping is included in the \$10/per mask cost.

Amount of check enclosed: _____ (Make check payable to LWVLC)

_____ * I will pick up my order at the LWVLC office.

The LWVLC is a 501(c)(3) non-profit organization and any amount donated over \$10/per mask is tax deductible.