



LIBERTY AREA FIRE PROTECTION ASSOCIATION

768 North 260 Road
MOUNDS, OKLAHOMA 74047-6098
www.libertyfire.org
Federal Tax ID 73-1292968



ANNUAL FIRE MEMBERSHIP INVOICE

Annual fire Subscriptions run October 1 through September 30 of the following year. Your property is within the Liberty Area Fire Protection Association coverage area.

Fire subscriptions are **\$60.00 per year / per dwelling or Business unit** and must be mailed to the address listed above or you may pay by following the secure PayPal link located on our website:

<http://www.libertyfire.org/donationsdues.html>

If you use PayPal, please enter your name and the address of the property being covered in the "Instructions to Vendor" section or send an email to lafpa1981@yahoo.com with the information to ensure proper credit.

Your subscription helps pay for fuel, equipment, training, insurance and other operating costs.

If the Liberty Fire Department responds to an incident at your location and you have not paid your current annual subscription, you will be billed in full for services provided. The billing amount will be the standard mitigated rate from insurance companies. Current paid members will not be personally responsible for any amount not covered by their insurance company.

Name and mailing address

Covered property address, if different

Phone: _____

Email: _____

Storm shelter at your location? Yes___ No___

Total number of properties being covered ___

Paying annual dues and providing proof of payment to your home owners insurance company may give you a discount on your premium. **If you need a receipt for your insurance company**, you must enclose a self-addressed and stamped envelope with your payment or provide an email address where we can send the receipt. Yes___ No___

Volunteers are needed and welcome to serve the Association in many ways. Volunteer firefighters, Board Member, help to maintain trucks, equipment & fire stations, fund raising activities and communications. If you are interested in volunteering in any capacity, please fill out the information below and someone will contact you.

I am willing to actively serve our Association by volunteering in the following capacity:

Fire Fighter___ Serve on Board___ Fund raising___ Other_____

Contact #:_____Email:_____

Please return this invoice with payment by October 1
If you have already sent in your payment for this year, please disregard this invoice