PLEASE PRINT OUT THIS PAGE AND FILL IN THE FOLLOWING INFORMATION. PLACE IN ENVELOPE AND MAIL TO:

## Columbiana County Emergency Management Agency 215 South Market Street Lisbon, OH 44432-1233



YES, I desire an in	ormational brochure addressing agri	cultural concerns during a radiological	emergency
Name			
Address			
City, State, Zip			
Home Phone	Cell F	hone	
Signature			
THE TYPE OF FARM	I HAVE IS (CHECK AS MANY AS	APPLY):	
Dairy	Beef H	og	
Poultry	Horse S	heep	
Vegetable	Fruit G	reenhouse	
Hay/Grain			
Other			
for your livestock or	what to do with your crops and fo team protect and provide resou	emergency, such as how to shelte ood. By filling out and mailing this rces and information that your fam	card, you
	be used for emergency manage gency or other special situation	ement purposes so we may contact.	t you in
DI FASE TAKE A FFW	MINUTES TO COMPLETE THIS C	ARD AND MAIL IT FACH YFAR	