CANISTER PLACEMENT FORM

Please submit this form immediately upon placing a Canister in any new location.

DATE:_____

NAME OF CIRCLE: _____

REPORTING PERSON:_____PHONE:_____

Canister No.	Location (business name) and address/city/state/zip	Person Servicing Canister	Phone no. of Person Servicing

Submit Completed Form to:

The King's Daughters office | 601 Children's Lane 2nd floor | Norfolk VA 23507 | tel:757-668-7098 |fax:757-668-8907 | email: info@kingsdaughters.org

2011-2012 Fiscal Year