

Veterans Memorial

I N L I T C H F I E L D

4" x 8" Engraved Brick
Order Form

Donor Name: _____

Address: _____

City, State, Zip: _____

Telephone: _____ Cell: _____

E-mail: _____

Please make checks payable to: **CITY OF LITCHFIELD**

Note Veterans Memorial Fund on check.

Mail to: Diane Nelligan Smith PO Box 435 Litchfield, MI 49252

Questions? Please contact Diane Smith at (517) 542-3222

Your inscription will be placed on a 4" x 8" brick. Space permits up to three lines of text per brick, 13 characters per line (including punctuation and spaces) maximum. Letters, numerals and common punctuation marks only. All engraved letters will be uppercase.

Donation for each 4" x 8" brick is \$ 100.00

Use one order form per brick

Order accuracy depends on you. Please PRINT clearly and place only one character or punctuation mark in each box. Leave boxes empty to indicate spaces between words. Your inscription will be automatically centered on the brick.

Office Use Only: Donor Payment Information

Office Use Only: Order / Brick Number