#### **Archer Lodge Veterans Memorial**

#### **Custom Engraved Brick Paver Order Form**

The Archer Lodge Veterans Memorial will provide an opportunity for you to honor, commemorate or recognize those family members or friends who have served our country. The custom engraved bricks will affirm for posterity the legacy of these brave men and women.

Name	 	 ·	
Address			
City State ZIP		 	 
Phone			
Email Address		 	 _

#### Please Note:

Inscriptions are centered on the brick paver and in all **CAPITAL LETTERS**. Please count <u>one</u> space for each letter, punctuation mark or blank space.

Inscriptions are subject to approval by the Town of Archer Lodge.

BRICK SIZES AND COSTS: (Please check the appropriate block as separate forms are available for each size brick)

4"x 8" Brick Paver - \$175

8 x 8 Brick Paver - \$350

AN EMBLEM CAN BE ADDED FOR AN ADDITIONAL COST OF \$30.

12 X 12 Brick Paver - \$500

AN EMBLEM CAN BE ADDED FOR AN ADDITIONAL COST OF \$30.

Please make checks payable to the Town of Archer Lodge. Forms can be mailed to:

Town of Archer Lodge 14094 Buffalo Road Archer Lodge, NC 27527

Cash and checks only! Order forms and payments can be hand delivered to Archer Lodge Town Hall. For more information, call 919-359-9727 or visit www.archerlodgenc.gov

This form serves as your receipt for the donation to the Town of Archer Lodge Veterans Memorial. The donor did not receive any goods, services or other benefits in exchange for this charitable contribution. The Federal Identification Number for the Town of Archer Lodge is 27-1989634.

# **Archer Lodge Veterans Memorial Order Form**

# 4" x 8" Brick Text Only

Donor's N	ame:
Address:	
Phone:	
Method o	Payment:
*3 lines of	17 characters or less per each line
Line 1	
Line 2	
Line 3	
Signature o	<sup>:</sup> Donor
 Date	

#### **Archer Lodge Veterans Memorial Order Form**

# 8" x 8" Brick with or without Emblem Donor's Name: Address: Phone: Method of Payment: Option 1 with Emblem: Branch of Service\_\_\_\_\_ \*3 lines with 17 characters or less per each line Line 1 \_\_\_\_\_ **Option 2 no Emblem - Text Only:** \*6 lines with 17 characters or less per each line Signature of Donor Date

### Archer Lodge Veterans Memorial Order Form

# 12" x 12" Brick with or without Emblem

Donor's Name:	
Address:	
Phone:	Method of Payment:
Option 1 with Emblem: Branch of Se	rvice
*6 lines with 21 characters or less per each I	ine
Line 1	<del></del> :
Line 2	
Line 3	
Line 4	
Line 5	
Line 6	
Option 2 no Emblem - Text Only:	
*8 lines with 21 characters or less per each l	ine
Line 1	
Line 2	
Line 3	
Line 4	
Line 5	
Line 6	
Line 7	
Line 8	
Signature of Donor	
 Date	