

# Veterans' Memorial

In the City of Parchment

Brick order form—\$75 per brick

Please make check payable to: City of Parchment Veterans' Memorial


Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Paid Date \_\_\_\_\_  
\_\_\_\_\_ Cash \_\_\_\_\_ Check \_\_\_\_\_

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