

I WISH TO DONATE

| <u>QUANTITY</u> | <u>ITEM</u> | <u>TOTAL</u> |
|-----------------|---------------------------------------|--------------|
| _____ | Commemorative Brick(s) @ \$30.00 each | _____ |
| | Total | _____ |

Brick Wording

____ (up to 14 letters per line)

____ (up to 14 letters per line)

____ (up to 14 letters per line)

____ (up to 14 letters per line)

____ (up to 14 letters per line)

____ (up to 14 letters per line)

Please bring or mail this form, with check , cash or money order, to Village Hall, 107 W. Broadway, Steeleville, IL 62288.

Your Name _____ Phone# _____

Address _____

Thank You!