

VICTIM MEMORIAL MINI GRAY BRICKS

Purchaser's Name: _____

Address: _____

City/Zip: _____

Phone: _____

Email: _____

Victim's Name: _____

MEMORIAL MINI BRICK (This information will be on the brick.)

Line 1: _____

Line 2: _____

Line 3: _____

\$15 is the cost for the Mini Gray Brick. Please remember that each line is limited to 18 characters to include spaces and punctuation. No personal checks. Return form and cash or money order to:

Shelly Hall/Victim-Witness
PO Box 1340
Columbus, GA 31902

_____ Received Payment