

PURCHASE A BRICK WITH THIS ORDER FORM *

Line 1:												
Line 2:												
Line 3:												
Line 4: (Optional)												

(For additional bricks, attach a copy of this form)



Purchased by: _____

Address: _____

City: _____

State: _____

Zip: _____

Phone: _____

DONATION FOR THE VETERANS MEMORIAL PLAZA

Enclosed is my check in the amount of \$ _____ as a donation toward the cost of on-going development of the Veterans Memorial Plaza (FEIN# 36-4150067). Contributions of \$25,000 or greater will be acknowledged by a plaque displayed at the DuPage County Government Center.

Name: _____ Phone: _____

Company/Organization: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Fax: _____

NAME OF VETERAN WHO DIED DURING A WAR, OR OF A WAR RELATED ILLNESS OR INJURY

Name of Veteran: _____ Military Branch: _____

Date of Death: _____ Name of War or Conflict: _____

Your Name: _____ Relationship: _____ Phone: _____

* If you need assistance completing the "Purchase A Brick" section of this form, e-mail: veterans.memorial@dupageco.org. All checks should be made payable to: DuPage County Veterans Memorial, Inc.

Mail all completed forms & checks to:
DuPage County Veterans Memorial, Inc.
C/O Terry Owens
421 N. County Farm Road
Wheaton, IL 60187