

# MEMORIAL PLAQUES

Date: \_\_\_\_\_

CUSTOMER NAME		
PHONE #		
EMAIL		
PAID AMOUNT <small>Attach copy of payment</small>		CC _____ CASH <small>Last 4 digits of card</small>

*Fill out how you would like to be on plaque*

<b>NAME:</b>	
<b>ENGLISH DATE OF DEATH:</b>	<b>HEBREW DATE OF DEATH:</b>

<b>Location on wall:</b>	
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<b>Notes:</b>	
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----- Office use only -----

Order date: \_\_\_\_\_ Rcvd plaque date: \_\_\_\_\_

Sent to housing: \_\_\_\_\_ Expected install date: \_\_\_\_\_

Date notified customer: \_\_\_\_\_ Entered in MM date: \_\_\_\_\_  
(email customer to let know plaque is installed)