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PASSING DATE/INSCRIPTION ORDER

() SINGLE (FLAT/UPRIGHT) () DOUBLE (FLAT/UPRIGHT) MO	DNUMENT COLOR:	-
			_
PASSING DATE OR INSCRIPTION	:		
NAME OF CEMETERY:		COUNTY:	_
PLEASE GIVE DIRECTIONS INSID	E THE CEMETERY:		_
SOME MAPS AVAILABLE, OR SKETCH M	AP ON BACK		
ORDERED BY:			_
RELATIONSHIP TO DECEASED: _	, , , , , , , , , , , , , , , , , , ,		_
ADDRESS:			_
PHONE:	EMAIL:		_
		DATE:	
SPELLING OF ALL INFORMATION PROVIDED		THAT IS NOT CORRECT. PLEASE MAKE SURE THAT THE DATES AND BY SIGNING THIS ORDER, YOU ARE CONFIRMING THAT THE DRY WORK.	
AMOUNT DUE:	AMOUNT PAID:	DATE:	_

AN OUT OF AREA CEMETERY FEE MAY APPLY. PRODUCTION TIME FOR ON SITE ENGRAVING AVERAGES 12 – 16 WEEKS. IT CAN TAKE SEVERAL TRIPS TO DO THE ENGRAVING. WE CAN NOT ENGRAVE IF THERE IS A FUNERAL, FAMILIES VISITING CLOSE BY OR IF THE MONUMENT IS WET FROM RAIN, DEW OR CEMETERY IRRIGATION. DUE TO COVID, ENGRAVING TIMES MAY BE LONGER.

REV 03/2021