



OHIO VETERANS' MEMORIAL PARK

OVMP MEMORIAL 8X8 PURPLE HEART BRICK CONTRACT FORM

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

Email _____

\$130.00

5 lines

20 characters per line

this includes spaces

and


punctuation

Please use **ALL CAPS**


Please print clearly

Please verify spelling






**HAROLD R MCCORD JR
NEW LEXINGTON OH
11-15-1948 - 5-26-1970
LOVED AND MISSED
NEVER FORGOTTEN**



**IN HONOR OF
PFC JAMES SABO
US ARMY WWII
5-3-26 - 1-26-08**



**CPL BENJAMIN DILLON
BCO3/75 RANGER
9/16/85 KIA OIF
10/6/07
RANGERS LEAD THE WAY**

DATE RECEIVED _____

CHECK NUMBER _____

APPROVED BY _____
OVMP OFFICER/TRUSTEE

SENT TO MELISSA _____

SPECIAL INSTRUCTIONS - CIRCLE ONE

CALL AFTER BRICK IS PLACED

CALL BEFORE BRICK IS PLACED

PLEASE CALL OR EMAIL WITH QUETIONS

****CANNOT PLACE BRICKS IN WINTER MONTHS****