



HELPING HANDS HUMANE SOCIETY CAPITAL CAMPAIGN

BRICK ORDER

Donor's Information

(Please print)

Donor/Company name: _____
(If company—include "Attn to" information)

Address: _____

City/State: _____ **Zip Code:** _____

Phone (daytime): (____) _____ **Email:** _____

Brick Options

(Please select)

\$125 4 X 8
Up to 2 lines
maximum

\$250 8 X 8
Up to 4 lines
maximum

Payment Information

Payment Options (circle one):

Cash Check Credit Card **Total Amount: \$** _____

Credit Card type (circle one):

Visa Mastercard Discover American Express

Card #:

Exp. Date: ____ / ____

Note: If billing address of credit card is different from home address, please include billing address below:

Street Address: _____

City/State: _____ Zip Code: _____

Brick Description

Please print description clearly. Maximum of 14 characters per line. Spaces count as characters.

Note: 4 X 8 brick only permits two lines; 8 X 8 brick has four lines.

LINE 1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
LINE 2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
LINE 3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
LINE 4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>