

# Memorial Board Plaque Order Form

(sample)

Beloved Husband Father  
Archibald Alexander Leach  
Jan.18,1904 - Nov.29,1986


Wording on your plaque--use three or four lines

\_\_\_\_\_  
Name of person placing this order

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone number or e-mail

**PRICE OF EACH PLAQUE** **\$360.00**

**RESERVE A SPACE for a Loved One** **\$100.00**  
**(Deposit--Future Balance due \$260.00)**

**CONTRIBUTION to Memorial Board Expansion** \$ \_\_\_\_\_  
**(Thank you)**

**TOTAL AMOUNT DUE** \$ \_\_\_\_\_

\_\_\_\_\_  
**Bill my Temple Account**

\_\_\_\_\_  
**Check**

\_\_\_\_\_  
**Credit Card (Visa, MC, Discover)**

\_\_\_\_\_  
**Card Number**

\_\_\_\_\_  
**Exp. Date**

\_\_\_\_\_  
**Signature**

***"May Their Memory Be A Blessing"***



**TEMPLE ADAT ELOHIM**  
your place to learn...grow...connect...