



## I am proud to support the Veterans Commemorative Monument project

<u>Donor Information</u> :	
Name: Address: City: Phone Number:	Postal Code:
Gift Options	
☐ I would like to purchase one or more of	commemorative brick (s).
brick(s) x \$150 per brick	Total: \$
A charitable tax receipt will be issued for a	a portion of the brick cost.
☐ I wish to support the Veteran's Comme	emorative Monument project with my one-time
Recognition: I wish to honour the follow	wing veteran:
	Date of Service::  Police (having served in peacekeeping duties)
For additional honouree information, please at	tached a separate sheet with your payment.
Payment Options	
Credit Card:   Visa   Master Card	
Card Number:	Expiry:
Name on Card:	Signature:
☐ Cheque (please make payable to) "Rer	membrance Fund"
$\ \square$ Please check here if you do not wish to	o be recognized for your donation
Pleas	nk you for your support! e return your donation to:     Clyde Healey

Please return your donation to:

Clyde Healey

Veterans Commemorative Monument

P.O. Box 20042

Unit 1 – 25 Trunk Road

Sault Ste. Marie, ON P6A 3S0