

HORIZON HEALTH FOUNDATION OF EAST-CENTRAL ILLINOIS GARDEN OF HOPE BRICK ORDER FORM

(all donations are tax deductible as allowed by law)

1	lame	e														_			
Address																			
City								Stat	e	Zip Code									
Email								Phone									Brick Example:		
Price per 8" x 8" brick: \$150 I'd like to make an additional donation: \$															In Memory of: Jane Doe Paris IL				
(One character per box: Limit 20 characters per line) 8x8 Brick #1																			
8x8 Brick #2																			
8x8 Brick #3																			

Make check payable to: Horizon Health Foundation 721 E. Court Street, Paris, IL 61944