



Flower Vase Order Form

Name: _____

Telephone Number: _____

Address (Street or P.O. Box): _____

City, State, Zip: _____

Person Vase is for: _____

Location:

- Mt. Vernon Road
- Civic Center Drive

Section: _____ Row: _____ Grave: _____

Comments:

Vase Price: \$95.00 each

Please make checks payable to:
Veterans Memorial Cemetery Association

Mail completed form and payment to:
Veterans Memorial Cemetery Association
P.O. Box 942
Augusta, ME 04332