

3D AD Monument Memorial Paver Program

Name _____ Phone # _____

Address _____

City _____ State _____ Zip _____

E-Mail _____

Credit Card Type (circle one)

VISA MASTER CARD

Credit Card # _____ - _____ - _____ - _____

Expiration Date _____ / _____ Three Digit Code # _____

Signature _____

INSCRIPTION FOR PAVER

Maximum 18 characters per line including dots and spaces (3 lines max)

Once you have completed this form, send it with your payment, check or money order, made out to the Association of the 3D Armored Division Veterans.

SEND TO:

Don Davis

201 Friendship Church Road

Douglasville, GA 30134

Please do not send cash. If you choose to order online and pay by means of Paypal or credit card, please place your order on the website at www.3ad.org.