☐ Yes, I w	ould l	ike to	purch	ase a b	rick ir	n hond	or or n	nemor	y of a	pet or	loved	one.			
Number of	f brick	s		at \$10	0 eacl	ı: T	OTAL \$	š							
Name:								Em	ail:						
Address:															
		State													
Day Phone	:						E	vening	Phone	:					
groups with	Humane Society of South Mississippi will honor all purchases made in memory or in honor of individuals and groups with a gift announcement mailed to your designee. Please complete the following: Types, I would like to remember with \$ Gift Memorial														
									_ with	₽		G	ш	— мет	oriai
Please mail															
Name:															
Address:															
City:		State:							Zip:						
Signature o	on card	:													
Donation Payment Please charge my donation to □ VISA □ MasterCard® □ AMEX □ Discover Billing Address:															
Account#: Exp. Date:															
Signature: Print Name:															
☐ My chec															
☐ I would						•		11 1411331	зэгррг	`	al Amo		Ł		
Humane Society of South Mississippi is a non-profit organization and your contributions are tax exempt. Please select a personal inscription for your memorial brick. There are 15 spaces available per line (3 lines maximum). Punctuation marks and spaces between words are regarded as spaces. Please leave a blank space in between each word of your message. Lines will be centered on the face of your brick.															
Line 1															
Line 2															
Line 3															
	have a friend who may be interested in donating/participating. Please Contact: Day Phone: Evening Phone:														