Donation Form

Donate-A-Brick Program

St. Joseph County Master Gardener

Bricks will be placed in The Educational Garden located at the St. Joseph County Grange Fair on the west end. They will be used as a walk path for visitors to enjoy the garden. The purpose of this walk path is to offer a safer place to walk that is also wheelchair/handicap friendly.

Mail or deliver completed donation form and a check made payable to **MSU Extension** to the MSU Extension office. The MSU Extension Office mailing address is as follows: **Master Gardener Program, c/o MSU Extension, 612 E. Main St.**, **Centreville, MI 49032** (*Form may be reproduced for additional donation/brick orders.*)

Donor Name _____
Please Print

Contact Person/Title _____
Please complete if business/organization

Complete Address _____
Street/P.O. Box No. City State Zip Code

Home Phone No. (_____) _____ Work Phone No. (_____) _____

Instructions: Please check the monetary contribution you would like to make, then complete the brick engraving information needed. (Personalization ideas include "In Memory of", "In Honor of", "Dedicated to", etc.)

_____ **$50 Donation *or* buy 2 for $75.00** Donor receives (5 ½" x 8 ¼ ") paver(s) engraved with two (2) lines of text (maximum of 14 characters per line including spaces and punctuation).

Brick #1

Brick #2

+_____ Write in additional cost of **$2.00/brick** if 15 or 16 characters are needed for one or more lines of text (versus the standard 14). Record extra characters at end of appropriate line(s).

+_____ Write in additional cost of **$5.00/brick** if an additional line of text is needed for one or more bricks. Record text for additional line below appropriate fill-in grid. Limit of one extra line per brick.

=_____ Write in **total amount of contribution**, including any extra engraving costs if applicable.

Important Note: Your contribution to the Master Gardener Donate-A-Brick Program is tax deductible if you itemize your deductions on your federal income tax form. Your cancelled check will serve as documentation of your donation. (Receipts are available upon request.)

Office Use: Receipt No. _____ Date Received ____/____/____ Check No. _____ Amt. $_____