Brick No(s).

Donation Form



Donor Name ___

4-H Donate-A-Brick Program



(brick(s) will be placed in 4-H Memorial Park in time for the upcoming Fair if received by May 31)

Mail or deliver completed donation form and a check made payable to <u>St. Joseph County 4-H Youth Council</u> to the MSU Extension office by May 31 in order for bricks to be in place by the upcoming Fair. The MSU Extension Office mailing address is as follows: **4-H Donate-A-Brick Program, c/o MSU Extension, 612 E. Main St., Centreville, MI**

49032 (Form may be reproduced for additional donation/brick orders.)

ntact Person/Title			Please	comp	olete i	f busir	ness/o	rganiz	ation.			
Street/P.O. Box No.					City					Sta	ite	Zip Code
ne Phone No. (No. ()				Work Phone No. ()							
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