GEMINI		Memorial Order Form nsing Way, Cannon Falls, MN 55009	DATE
GeminiBronze.com Bronze@GeminiMade.com		1-800-533-0520	PO#
		Fax: 1-800-421-1256	CUSTOMER #
BILL TO:		Ship to if diffi	ERENT:
PHONE:		EMAIL:	
FAX:	C(	ONTACT:	
BRONZE MEMORIAL			
TIMELESS SENTIMENTS *Vector art requ		GOVERNMENT MATCH	W–N ART BRONZE
	SIZE:	BORDER DESC: _	
(Refer to Memorial Item Number Document)			
	SCAN VASE	NO VASE	
DATE FORMAT: NO SO	CROLL-CAST INTEGRA		UNICAST
ETTER STYLE			
FLAT OV	'AL	US GOVERNMENT	
COLOR			
DARK BROWN	HT BROWN	BLACK	MAROON
GREEN DA	RK BLUE	OTHER:	
EMBLEMS			
(1) STANDARD ITEM #:		(5) CUSTOM:	SCULPTED FLAT
(2) STANDARD ITEM #:		(6) CUSTOM:	SCULPTED O FLAT
(3) STANDARD ITEM #:		(7) CUSTOM:	SCULPTED O FLAT
(4) STANDARD ITEM #:		(8) CUSTOM:	SCULPTED O FLAT
AYOUT & ARTWORK			
COMPANION INE	DIVIDUAL	SKETCHED LAYOUT B	
SURNAME:		(Use number to show emblem l	location)
FIRST NAME:			
DEATH DATE: SECOND NAME:			
BIRTH DATE:			
DEATH DATE:			
ADDTITIONAL INSCRIPTION:			