

# SPECTRIOS INSTITUTE BRICK DONATION ORDER FORM

Complete form and return to address below. Type into fields or print and complete by hand.

Brick Descriptions	Quantity	Unit Price	Total
Single patio brick to be placed in the Commemorative Garden	_____ x	\$ 125 =	_____
Double brick that will be placed on the "Walkway of Hope"	_____ x	\$ 500 =	\$ _____
Design your own brick that will be placed on the "Walkway of Hope"	_____ x	\$ 1500 =	\$ _____
		Total Brick Donation	\$ _____

Donor Information	
Name _____	
Address _____	Unit # _____
City _____	State _____
Phone _____	Email _____

Payment Information	
___ Check	___ MasterCard
___ Visa	___ Discover
Card # _____	Expiration (mm/yy) _____
Signature _____	

Inscription for Single and Double Bricks	
<ul style="list-style-type: none"><li>• If ordering more than one brick, attach additional form(s) and complete inscription section only</li><li>• One character per space</li><li>• To design your own brick, contact Diane Levine at the address below</li></ul>	
Inscription for:	___ Single Brick      ___ Double Brick
Line 1	_____
Line 2	_____
Line 3	_____

Return form to: Diane Levine, Director of Development • Spectrios Institute for Low Vision  
at Deicke House • 219 E. Cole Ave. • Wheaton, IL 60187 • (630)690-7115 • fax (630)690-9037