

# Engraved Paver Worksheet

Line 1 

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Line 2 

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Line 3 

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**Note: Please place only one character in each box.  
All letters, punctuation, and spaces count as one character each.  
No more than 18 characters per line.**

**Please print clearly to ensure accuracy  
of engraving.**

**Pavers will be ordered approximately 2-3 times per year**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_  
(In the event we have questions about your order)

**(Optional) Please send an acknowledgement of this paver to:**

**Name** \_\_\_\_\_

**Address:** \_\_\_\_\_

If you have questions, please call the Hospice office at (336) 427-9022

Please mail form to: Hospice of Rockingham County · PO Box 281 · Wentworth, NC 27375