

Rostraver Veterans Memorial Park Association

P.O. Box 532, Belle Vernon, Pennsylvania 15012

PLEDGE OF SUPPORT

Business Name: _____ Phone No.: _____

Address: _____

Contact Name: _____ Position: _____

Memorial(s) Selected: _____

Desired Inscription on Memorial(s) - Maximum 6 Lines, 28 characters/spaces per line:

Total Amount of Pledge: \$ _____ (Optional) Paid over _____ Months

Amount Paid: \$ _____

Authorized By: _____
Printed Name

Date: _____

Authorized Signature

Received By: _____
(for) Rostraver Veterans Memorial Park Committee

A Veterans Nonprofit Organization

Your support of the
**ROSTRAVER VETERANS
MEMORIAL PARK ASSOCIATION**
is greatly appreciated!

Help pay tribute to the men and women of
Rostraver Township, who have served our great
country in war and peace. All past and present
residents are invited to be registered.

Registration is \$25 per veteran to have the
veterans name inscribed on a vertical granite tablet.

Make checks payable to:
ROSTRAVER VETERANS MEMORIAL
P.O. BOX 532
BELLE VERNON, PA 15012

Memorial pavers are also available in four sizes:
3" X 9" - \$150 - 17 characters/spaces per line - 3 lines
6" X 18" - \$250 - 24 characters/spaces per line - 4 lines
9" X 18" - \$350 - 24 characters/spaces per line - 5 lines
12" X 27" - \$500 - 28 characters/spaces per line - 6 lines

**Memorial Benches, Corporate Pavers, & Tablet Bases
Are Also Available (over)**

For information call:

Chairman	DR. R. SERINKO	724-929-5980
Treasurer	R. FABRIZIANI	724-929-5335
Secretary	R. SUROVCHAK	724-930-8722
Finance Chairman	N. LORENZO	724-929-5914

The Memorial Park will be constructed
at the Municipal Complex on Port Royal Road

Applications are on back

