

JOHN M. HARRIS CO.

GRAVE MARKERS • CREMATION URNS • MEMORIAL PRODUCTS

226 S. Lucia Ave. Suite #1 Redondo Beach, CA 90277 • Phone: 877.723.5677 • Fax: 775.599.8591

Companion/Individual Marker Order Form

Bill To:		Ship To:	
Date:		Company/Cemetery Name:	
Name:			
Address:		Address:	
City:		City:	
State:	Zip:	State:	Zip:
Daytime Phone:		Phone:	
E-mail:		Burial Location:	

Lettering for names & dates are included in price. Companion memorial will be laid out as if you are standing at the foot of the grave looking up at the head. For individual memorials use the left side to fill in the name and dates.

Left/Top Side	Lettering & Dates	Right/Bottom Side
Name:	Name:	Name:
D.O.B.	D.O.B.	D.O.B.
D.O.D.	D.O.D.	D.O.D.

Family Surname:

Emblems

Two (2) emblems are allowed for an individual memorial and three (3) for a companion memorial. Emblems are included in the price for bronze memorials but cost extra (\$80.00 ea.) for sandblasted granite memorials.

Emblem 1:	Emblem 2:	Emblem 3:
Location:	Location:	Location:

Special Instructions/Additional Lettering

A maximum of 25 additional letters for a verse/inscription are allowed. Additional letters are \$1.95 ea.

Purchases

Size	Item Description	Vase	Other	Granite Color	Price

(California Residents) Sales Tax of 9.25% will be added to subtotal:

Total Amount Paid:

Payment Method

Check/Money Order
 Master Card
 Visa
 American Express
 PayPal

Name On Card: _____ CVV Code: _____

Card Number: _____ Expiration Date: _____

X Signature: _____

I the undersigned understand the total cost is for the grave marker(s) described herein delivered and excludes any cemetery fees. I also understand the marker(s) will be laid out for best appearance. Further by signing this document I agree to the terms set forth on the Granite Grave Markers.com web site. Affixing either a digital or printed signature/s obligates me/us to a non-refundable deposit of 25% of the total cost, if order is canceled.

X Signed: _____ **X** Date: _____

X Printed Name: _____