

# CALDWELL MONUMENT COMPANY

3047 W State Road 18 Kokomo, IN 46901  
Phone: (765) 459-8480 ~ (800) 551-3837  
Fax: (765) 459-8829  
Email: office@caldwellmonument.com  
www.caldwellmonument.com

Date of Order: \_\_\_\_\_

Name of whom the engraving is for: \_\_\_\_\_

Any other names on the memorial: \_\_\_\_\_

INSCRIPTION TO BE ENGRAVED: (Put in the box below exactly what is to be engraved)

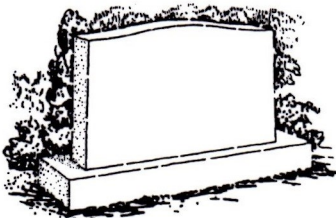
Name of Cemetery: \_\_\_\_\_ City: \_\_\_\_\_

Cremation: Yes  No

Description of Memorial: \_\_\_\_\_

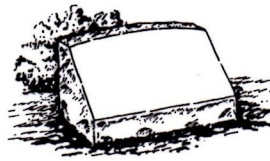
Size: \_\_\_\_\_

Color: \_\_\_\_\_

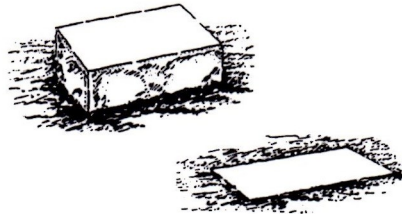


Upright Monument

(Circle Shape Style)



Slant Face Marker



Bevel or Flat Marker

Order Placed by & to be Paid in Full by:

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

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

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Cost of Service: \_\_\_\_\_

\_\_\_\_\_

Signature of Approval

By signing I give my approval of the accuracy of the above information to be engraved, and take full financial responsibility if it is not accurate.

Cemetery Map or Location Information: