Details of Deceased		Customer Contact	Customer Contact Details		
Name:					
Address: (optional)		Name:	Name:		
•		Address:			
Date of Birth: (optional)		••			
Date of Death:	Age: (optional)	•••			
Please write in BLOCK letters the	exact details to appear on your card				
MEMORIAL CARD					
Front Page: Pic No	Wording	Back Page: Pic No	Verse No		
Inside Left: Photo Style	Verse No	Inside Right: Pic No	Verse No		
Any other instructions:					
Quantity Required:					
BOOKMARK/WALLET (CARD				
Ford Die Me					
Front:Pic No Wording					
Back: Pic No Ve	erse No Photo	o Style Round/Squa	are Corners		
Any other instructions:					
		Quantity Required:			
ACKNOWLEDGEMENT (CARDS/LETTERS				
2 Page - Front Page: Pic No.	Wording	Back: Wording			
4 Page - Front Page: Pic No	Wording	Back Page: Pic No	Verse No		
Inside Left: Verse	Inside Right: Wording				
more Lett. Verse	morae right. Wording				
Letter - Letter Style	Photo Style	Wording			
Any other instructions:					
		Quantity Required:	Quantity Required:		
Capp Horpens					
CARD HOLDERS					
Style: Any of	other instructions:				
		Quantity Required:			
KEYRINGS/PHOTO ENI	ARGEMENT				
Wording/Siza	Overtity Required	Any other instruc	· ·		