

Date _____

Reference _____

Amount _____

Martus Stone
8989 South State Hwy 19
Elkhart, Texas 75839

Passing Date Order

Single Flat Single Upright Double Flat Double Upright Color _____

Name of Deceased _____

Spouse or other name on double monument _____

Inscription/Date to be added:

Cemetery _____ County _____

(Please include: map to cemetery and directions inside cemetery)

Contact Info:

Name _____

Relationship to the deceased _____

Address _____

(Street Address) (City) (State) (Zip)

E-mail _____

Martus Stone is not responsible for any information given that is not correct.

Please make sure the date and all spelling is correct.

Signature of Person Ordering and Approving Work

Phone Number