RCMP & COMMUNITY CLAIM FORM

PILLARS OF THE FORCE

Donor Information - *For Charitable Tax Receipt*

Submission Date: _____ *(Month / Day / Year)*

Donor's Name: _____

Address/Box #: _____

City/Town: _____   Province/State: _____

Country: _____   Postal/Zip Code: _____

Primary Phone: _____   Alternate Phone: _____

Email Address: _____

Claim Order Summary

Product	Unit Price		Quantity	Total
Nameplate	$300	x	_____	$ _____
Brick (4 x 8 in)	$300	x	_____	$ _____
Brick (8 x 8 in)	$500	x	_____	$ _____
"No One Left Behind" Fund Donation			Donation:	$ _____
All prices are in Canadian Dollars (CAD)				
			Your Donation / Grand Total:	$ _____

Method of Payment - *Select one option*

☐ Cheque by Mail   ☐ Credit Card by Phone   ☐ Interac e-Transfer   ☐ Online

Please refer to our website for payment instructions.

Please complete the corresponding Claim Information pages for your order.

For example, if you are claiming a Nameplate, please ensure you complete the Nameplates page.

If you require more space, please print additional copies of the pages to include with your order.

Once your claim is received, we will contact you regarding submitting your **Story** and **photos**.

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PILLARS OF THE FORCE

Use this page to provide the information that should appear on each **Nameplate**.

To create a "Group" and have multiple Nameplates placed together, fill in the additional rows. Only ONE (1) individual's name per Nameplate. Print additional copies of this page if needed.

1

Surname: _____ Initial(s): _____

Troop or Engagement Date: _____ Regimental # if applicable: _____

Example: "TR. 3 1965/66"

2

Surname: _____ Initial(s): _____

Troop or Engagement Date: _____ Regimental # if applicable: _____

Example: "TR. 3 1965/66"

3

Surname: _____ Initial(s): _____

Troop or Engagement Date: _____ Regimental # if applicable: _____

Example: "TR. 3 1965/66"

4

Surname: _____ Initial(s): _____

Troop or Engagement Date: _____ Regimental # if applicable: _____

Example: "TR. 3 1965/66"

5

Surname: _____ Initial(s): _____

Troop or Engagement Date: _____ Regimental # if applicable: _____

Example: "TR. 3 1965/66"

6

Surname: _____ Initial(s): _____

Troop or Engagement Date: _____ Regimental # if applicable: _____

Example: "TR. 3 1965/66"

BRICKS - *For Bricks on the Walkway*

Use this page to provide the information that should be engraved into each **Brick**.

To create a "Group" and have multiple Bricks laid together, fill in the additional boxes.
Print additional copies of this page if needed.

1

Brick Size
(Choose One)

☐ **4" x 8"**
(up to 3 lines)

☐ **8" x 8"**
(up to 6 lines)

Text for Brick
(Up to 20 characters per line or logo)

1 _____
2 _____
3 _____
4 _____
5 _____
6 _____

2

Brick Size
(Choose One)

☐ **4" x 8"**
(up to 3 lines)

☐ **8" x 8"**
(up to 6 lines)

Text for Brick
(Up to 20 characters per line or logo)

1 _____
2 _____
3 _____
4 _____
5 _____
6 _____

3

Brick Size
(Choose One)

☐ **4" x 8"**
(up to 3 lines)

☐ **8" x 8"**
(up to 6 lines)

Text for Brick
(Up to 20 characters per line or logo)

1 _____
2 _____
3 _____
4 _____
5 _____
6 _____

4

Brick Size
(Choose One)

☐ **4" x 8"**
(up to 3 lines)

☐ **8" x 8"**
(up to 6 lines)

Text for Brick
(Up to 20 characters per line or logo)

1 _____
2 _____
3 _____
4 _____
5 _____
6 _____

5

Brick Size
(Choose One)

☐ **4" x 8"**
(up to 3 lines)

☐ **8" x 8"**
(up to 6 lines)

Text for Brick
(Up to 20 characters per line or logo)

1 _____
2 _____
3 _____
4 _____
5 _____
6 _____

6

Brick Size
(Choose One)

☐ **4" x 8"**
(up to 3 lines)

☐ **8" x 8"**
(up to 6 lines)

Text for Brick
(Up to 20 characters per line or logo)

1 _____
2 _____
3 _____
4 _____
5 _____
6 _____