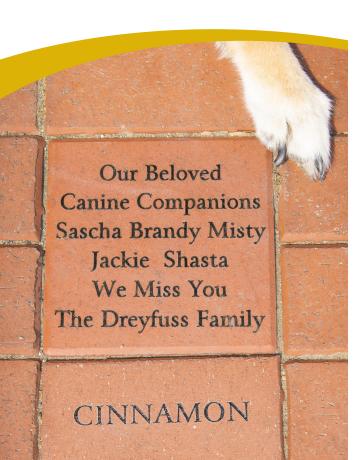
Inscribed Brick Order Form

An inscribed brick at the Center for Companion Animal Health is an enduring way to share a special message. The Brick walkway is located in Edna's Park at the Center for Companion Animal Health (CCAH).

On your brick, you may wish to:

- Honor a much-loved pet
- Pay tribute to a family member or friend
- Recognize a special veterinarian
- Memorialize a beloved animal



Location



Contact us

Center for Companion Animal Health

Telephone: 530-752-7024 Email: svmadvancement@ucdavis.edu

Online Gifts:

https://give.ucdavis.edu/Go/MemorialBrick

Inscribed Brick Website:

https://ccah.vetmed.ucdavis.edu/giving/ccahbrick-pathway

Center for Companion Animal Health Website:

https://ccah.vetmed.ucdavis.edu









Inscribed Brick Order Form



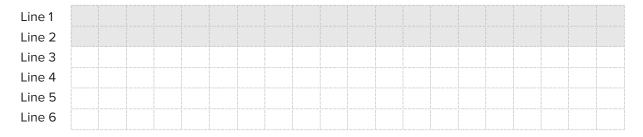


To order your inscribed brick, please complete the information below. You may choose from two sizes.

A graphic element may be inscribed on your brick. You may choose from any of those pictured below. Please enter the code of your selection here:

Na52 Na55 Na41 Na44 Na43 Na60 Na₆₁ Na58 8" x 8" Brick 4" x 8" Brick Pathway Gift \$275 Pathway Gift \$150 14.4 **MUFFIN** Forever BUDDY loved My best friend and the most loyal dog

The 8" x 8" brick has a maximum of 6 lines, 20 characters per line (including lettering, punctuation and spaces). Please print your message in the boxes below. If adding a graphic element, leave shaded boxes blank.



The 4" x 8" brick has maximum of 3 lines, 20 characters per line (including lettering, punctuation and spaces). Please print your message in the boxes below. If adding a graphic element, leave shaded boxes blank.

Line 1										
Line 2										
Line 3										

Funds are used for priorities such as animal health studies, equipment, facilities improvements, operational costs and other CCAH program offerings. To view the Giving to UC Davis disclosures, please visit: giving.ucdavis.edu/ways-to-give/disclosures.html

YESI I (we) would like to support the Memorial Brick Fund

Your Name and Contact Information

Name		
Address		
City	State	Zip
Phone	Email	
Payment Method		
\square Check (payable to $\$	JC Regents) for $\$$	
☐ Charge to my/our □	JVisa □MC □AN	MEX □ Discover
Amount to charge \$		
Acct. no.		Exp. date
Name on card (please	print)	Billing zip
Signature		Date
•	ft online, please v	
Tributes (if applicabl		MemorialBrick
This gift is in Memo	,	choose one):
Name of □ person or	pet (please print	<u> </u>
☐ Please make this gi	ft known to (if applic	able):
Name		
Address		

☐ Please send information about including the Center for Companion Animal Health in my (our) estate plans.

State

Zip

Please return this form to:

UC Davis School of Veterinary Medicine Office of Advancement P.O. Box 1167 Davis. CA 95617-1167

For more information.

please call 530-752-7024 or email symadyancement@ucdavis.edu

Thank you!

City