

CONTRIBUTION TO BETHLEHEM CEMETERY

Name _____

Address _____

Date _____

Contribution amount _____

(check made payable to Bethlehem Cemetery)

How is your contribution to be applied?

_____ Memorial Garden

_____ Cemetery Tree replacement fund

_____ Cemetery Road replacement /maintenance fund

Please print, fill out, and send the form with your check to:

Bethlehem Cemetery

C/O Bethlehem United Church of Christ

423 S. Fourth Avenue

Ann Arbor, MI 48104