



# BRICK BY BRICK

FOR

HACKENSACK, NJ

• JPL •



# Paver Form

I want to be part of the Johnson Public Library's rich history and with to help endure and protect its future.

Please fill in the form below and return to the *Circulation Desk* or mail to:  
*Johnson Public Library, Attn: Tara Franzetti, 274 Main Street,  
Hackensack, NJ 07601.*

Please make checks payable to: *Johnson Public Library*

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I wish to purchase a paver

4x8     \$100     3 lines @ 14 characters per line  
(Not available for business)

8x8     \$500     4 lines @ 14 characters per line

12x12   \$1,250     5 lines @ 15 characters per line  
(Your logo included after engraver approval)

### Inscription:

Print exactly the way you wish your paver to read.  
Clearly indicate uppercase and lowercase letters. Spaces, numbers, and punctuation count as character space. All text will be centered.

Line 1: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

Line 2: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

Line 3: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

Line 4: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

Line 5: \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

Donor's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Recipient's Name: \_\_\_\_\_

Recipient's Family's Name (if for a memorial): \_\_\_\_\_

Address: \_\_\_\_\_