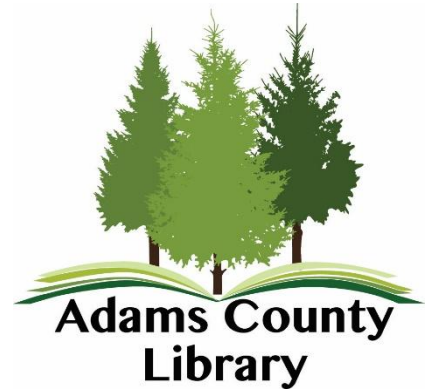


Memorial / Gift Donation Form

I/We would like to make a donation to enrich the lives of all people who use the Adams County Library. This gift is:

☐

In memory of:

☐

In honor of:

☐

For the anniversary of:

☐

Other (please give details):

Enclosed is my donation of ____\$500 ____\$250 ____\$100 ____\$50 ____Other

Please direct my contribution to the following:

☐

Book title or book subject suggestion:

☐

Pick any book needed by the Library.

☐

Item on DVD, CD, audiobook, or other format needed by the Library (Please note that some formats do not have space to apply a memorial plate to the item)

☐

Library program supplies or performers

Please send letter acknowledging this gift to (amount will not be disclosed)

Name: _____

Address: _____

☐

Please keep my gift anonymous.

DONOR INFORMATION FOR RECEIPT

Name: _____

Address: _____

Telephone number (in case of questions) _____

Checks may be made out to: **Adams County Library.**

Please mail to: Adams County Library, 569 N. Cedar St., Adams, WI 53910