



Donation Form

Today's date: _____

Donor name: _____

Mailing address: _____

Telephone: _____

Total amount enclosed/received: _____

Please describe the purpose of the donation (for example: "purchase of new DVDs for use at Mississippi Branch" or "Summer Reading Program"); if gift is to be divided among multiple uses, please describe each.

Purpose #1: _____ Amount: _____

Purpose #2: _____ Amount: _____

Purpose #3: _____ Amount: _____

If the gift is in memory/honor of someone, please circle the appropriate designation and include the name of the person. A bookplate will be placed in the material.

In Memory of _____ In Honor of _____

Should the Library send an acknowledgement of this gift to anyone else? If so, please include their name and complete mailing address:

Please complete this form and mail to the address listed below OR give it to Library staff at the service desk. If you have any questions, please call 763-324-1500. Thank you for your generosity.

Anoka County Library
707 County Rd 10 NE
Blaine MN 55434-2398

For Office Use Only:

Date received: _____ Log Number: _____

Date acknowledged: _____ Date presented to Library Board: _____

Other: _____