



# Flat River Community Library

## HONOR/MEMORIAL FUND DONATION FORM

DONATION AMOUNT \$ \_\_\_\_\_

☐ IN MEMORY OF

☐ IN HONOR OF

BOOK PLATE INFORMATION (INSIDE LIBRARY MATERIAL)

TRIBUTE'S NAME: \_\_\_\_\_

DONATED BY: \_\_\_\_\_

### DONOR CONTACT

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

EMAIL (OPTIONAL): \_\_\_\_\_

### ACKNOWLEDGEMENT SENT TO (NEXT OF KIN)

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

EMAIL (OPTIONAL): \_\_\_\_\_

### MATERIALS TYPE/REQUESTS (PLEASE INDICATE SPECIFIC REQUESTS)

☐ ADULT ☐ YOUTH ☐ TEEN ☐ HANS C ANDERSEN ☐ ANY COLLECTION

☐ BOOK ☐ DVD ☐ AUDIOBOOK ☐ ANY FORMAT

SUGGESTED SUBJECT/INTERESTS: \_\_\_\_\_

### \*\*\*\*\* STAFF USE ONLY\*\*\*\*\*

DATE \_\_\_\_\_ AMOUNT COLLECTED \$ \_\_\_\_\_ CREDIT/CASH/CHECK NO \_\_\_\_\_ ACCEPTED BY \_\_\_\_\_

DEPOSIT DATE \_\_\_\_\_ # of items selected for this donation \_\_\_\_\_

Dates Ordered \_\_\_\_\_ Dates Received \_\_\_\_\_

LETTERS SENT TO: DONOR \_\_\_\_\_ NEXT OF KIN \_\_\_\_\_ DONOR \_\_\_\_\_ NEXT OF KIN \_\_\_\_\_

EXCEL LINE NUMBER \_\_\_\_\_ ANNOUNCED ON FACEBOOK \_\_\_\_\_ MEMORIAL COMPLETED \_\_\_\_\_

\*TO VIEW SELECTED TITLES, SEE MEMORIALS TRACKING IN THE MEMORIALS FOLDER ON S:MEMORIALS