Date	Memorial/Honor Request Form	Name(LAST)	taff Use Only***
Person(s) Memorial	/Honor is for_ (Print as Donor v	vants to appear in the Newslett	er/Bookplate if applicable.)
Donor(s):(Print as desi	red in the Newsletter/Bookplate if	applicable.)	
Donor's address & բ	ohone number		
Name & address of	person to receive memor	ial notice from library (Limit of 1):
	Adult Juveni		
additional materials programs. Any boo	od stewards of your don for our collection or pr ks purchased will have a Newsletter. Thank you	ovide supplies for upo a book plate placed in t	coming youth and adult the front. All donations
=======	=====(Library Sta	aff Use Only)====	========
	Where donat	tion was used:	
			-

PAYMENT MADE____ NOTICE(S) SENT___ BOOK(S) PROCESSED (If applicable)____ IN NEWSLETTER____