

LANE PUBLIC LIBRARY

DONATION FORM

DONOR INFORMATION:

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CITY: _____ STATE: _____ ZIP: _____

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PHONE NUMBER: _____

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Please choose one of the following Branches and/or Departments to receive your gift

- Hamilton Branch \$ _____
- Fairfield Branch \$ _____
- Oxford Branch \$ _____
- Bookmobile/Outreach Services \$ _____
- Department \$ _____
- Other \$ _____

Please direct my gift to:

- Where need is the greatest
- Programs for Library users
- Books and materials
- Other: _____

Memorials and Tributes:

This is a special gift:

In Memory of: _____

In Honor of: _____

Please send an acknowledgment to the honoree or next of kin listed:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

GIFT PAYMENT

- My check is enclosed made payable to Lane Public Library.
- My payment was made online using the Donate option.

Please Mail or Fax to:

Lane Administration Center
Attn: Business Office
1396 University Blvd.
Hamilton, OH 45011

Ph: 513-894-0113

Fax: 513-894-6558