

MEMORIAL/HONOR BOOK WORKSHEET

Please make checks payable to the Glenwood Public Library

Date: _____

Circle One: Memorial Honor Birthday

This gift is honoring: _____

Choose one, or any combination of the following:

- ___ \$10 for paperback
- ___ \$20 for hardcover fiction
- ___ \$30 for hardcover non-fiction
- ___ other amount _____

Office Use Only: Amount Paid: _____ Receipt # _____ Paid by: _____ _____ Date Paid: _____
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If it is your wish, please choose a subject area: _____

Please send information for publication in the Glenwood Opinion-Tribune. Yes No

Send card to: _____

Address: _____

Office Use Only: Card: Y N Mailed Delivered Date: _____ <u>Book plate information:</u> HONOREE: _____ By: _____ _____ _____ _____
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Donor (First & Last Name): _____

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City: _____ State: _____ Zip: _____

Has made a donation of \$ _____, to be utilized as designated below.
No goods/services were provided in return for this gift.

This form meets the requirements of an IRS charitable donation receipt.

