



Kendallville Public Library Donation Form

Donor Name: _____

Donor Phone Number: _____

Donor Email Address: _____

Donor Mailing Address: _____

My Donation is: _____ In Honor _____ In Memory

Who is your donation for? _____

Donation Amount: _____

Who should we notify about your donation (name, address, phone number):

I would like my donation to be used to purchase a ___ book, ___ DVD or a
___ Library of Things Item.

Item Title: _____

Author/Company: _____

Genre: _____ Topic: _____

Other Information: _____

Please remit with cash, card, or check at any Kendallville Library location.