



ALLEN PUBLIC LIBRARY MONETARY DONATION FORM

DONOR INFORMATION

DATE _____

Your Name _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Email _____

GIFT AMOUNT

Enclosed is my gift of \$ _____ to support the Allen Public Library.

I would like to direct my gift:

I would like to allocate my gift:

In honor of _____

Select One:

In memory of _____

A book for the Library collection

Please make checks payable to Allen Public Library.

Mail your donation with a printed copy of the completed Donation Form to:

Allen Public Library
Attention: Donations
300 North Allen Dr.
Allen, TX 75013

HONORARIUMS AND MEMORIALS

For honorariums and memorials only. If you desire, the Library will send a letter notifying family members of your gift. Please note that a minimum of \$25 is required for a memorial bookplate.

Who should we send the letter to? _____

Address _____ City, State Zip _____

Suggested Authors/Topics? _____

Please complete the following as you would like to appear on your bookplate.

In Memory/Honor of _____
