

The Millicent Library  
Memorial Donations

Fiction \_\_\_\_\_ Nonfiction \_\_\_\_\_ Children's \_\_\_\_\_

Amount:

Date:

Donor Name and Address:

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**Check one box**

**Memorial book(s) in honor of a friend or relative**

Name of person honored:

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Subject of book or other item (optional):

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**Gift to commemorate a special occasion**

Name of person honored:

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Occasion:

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Subject of book or other item (optional):

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**Unrestricted Gift**

Acknowledgement should be sent to:

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