

\_\_\_\_\_  
(Library Use Only)

Date \_\_\_\_\_

\_\_\_ In memory of: \_\_\_\_\_

Hobbies, interests and likes:

\_\_\_ In honor of: \_\_\_\_\_

\_\_\_\_\_

\_\_\_ Gift

\_\_\_\_\_

Donor Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Notify: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Amount of Gift: \_\_\_\_\_

**Send completed form and check to:**

**Community Library of the Shenango Valley  
11 N. Sharpsville Ave.  
Sharon, PA 16146.**

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Library Use Only:

\_\_\_\_\_ Thank you card

\_\_\_\_\_ Notify Family

Titles ordered: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_