

**FRIENDS OF THE  
HARRISON TOWNSHIP LIBRARY  
GIVING FORM**

**DONOR INFORMATION**

Name: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**GIFT AMOUNT:**

\_\_\_\_\_ \$15    \_\_\_\_\_ \$25    \_\_\_\_\_ \$50    \_\_\_\_\_ \$75    OTHER: \$\_\_\_\_\_

**Please apply my gift to:**

\_\_\_\_\_ Endowment Fund    \_\_\_\_\_ Library Programs

\_\_\_\_\_ Tribute/Memorial    \_\_\_\_\_ Honor with Books

\_\_\_\_\_ In Memory of \_\_\_\_\_

\_\_\_\_\_ In Honor of \_\_\_\_\_

**Please send acknowledgement to:**

Name: \_\_\_\_\_

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

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