



Kaukauna Public Library
Memorial Book Donation Form

Please accept this donation in the amount of \$ _____ (minimum of \$25)

Donor Name: _____

Donor Address: _____

Bookplate Personalization Requested:

_____ In Memory of: _____

_____ In Honor of: _____

_____ Include organization logo on bookplate for (organization name): _____
Library staff will copy logo from organization website unless file is emailed to Library Director.

Subject/Title/Genre Requested:

Book Type:

- Large Print
- Child
- Teen
- Adult

Acknowledgement Sent To: _____

Acknowledgement Address: _____

_____ I wish to have my personal information shared in the acknowledgment letter.

_____ I wish to remain anonymous.

Memorial book donations are maintained under the Collection Development Policy.

Library Staff: Submit completed form and payment to Library Director for processing.

_____ Receipt of donation sent _____ Acknowledgement of donation sent _____ Items selected