



# Donation Form

Today's date: \_\_\_\_\_

Donor name: \_\_\_\_\_

Mailing address: \_\_\_\_\_  
\_\_\_\_\_

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

Total amount enclosed/received: \_\_\_\_\_

Please describe the purpose of the donation (for example: Children's literacy and learning or where needed most); if gift is to be divided among multiple uses, please describe each.

Purpose #1: \_\_\_\_\_ Amount: \_\_\_\_\_

Purpose #2: \_\_\_\_\_ Amount: \_\_\_\_\_

Purpose #3: \_\_\_\_\_ Amount: \_\_\_\_\_

If the gift is in memory/honor of someone, please check the appropriate designation and include the name of the person.

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

Should the Library send an acknowledgement of this gift to anyone else?  
If so, please include their name and complete mailing address: \_\_\_\_\_  
\_\_\_\_\_

Please complete this form and mail to the address listed below OR give it to Library staff at the service desk. If you have any questions, please call 763-324-1500.  
Thank you for your generosity.

Anoka County Library  
707 County Rd 10 NE  
Blaine MN 55434-2398

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For Office Use Only: **Recorded in WF by:** \_\_\_\_\_  
**Date received:** \_\_\_\_\_ **Log Number:** \_\_\_\_\_  
**Date acknowledged:** \_\_\_\_\_ **Date presented to Library Board:** \_\_\_\_\_  
**Other:** \_\_\_\_\_