



Your Information Station

California Area Public Library

100 Wood Street
California, PA 15419
Phone: (724) 938-2907

Please make all checks payable to California Area Public Library

1. Type of Memorial (check box): Book Endowment Technology Beautification

2. Donated by: (Person, family, or organization as it will appear on the announcement)

3. Please choose (check box): In Memory of In Honor of On the Occasion of

4. Name and address of the person making the donation. (This person will receive acknowledgement after the gift has arrived.)

5. Name and address of person to receive gift announcement. (This person will receive and immediate announcement of your gift.)

For Office Use Only

| | | | |
|--------------------------|--------------------|--------------------|------------------|
| Card _____ | Gift Ordered _____ | Gift Arrived _____ | Donor Card _____ |
| Cash _____ | Check _____ | Other _____ | |
| Plate placed on item | Date: _____ | Initials: _____ | |
| Immediate Announcement | Date Sent: _____ | Initials: _____ | |
| Acknowledgement Sent | Date Sent: _____ | Initials: _____ | |
| Item(s) dedicated: _____ | | | |