

Main Library, Monroe Edwards Memorial Library, Marshville Union West Regional Library, Indian Trail Waxhaw Library, Waxhaw

## **MEMORIAL & HONORARIUM BOOK DONATIONS**

This form can be completed in person or mailed to the address listed on the bottom of this page. Please make sure to include your payment with the form. For additional information, contact us at 704-283-8184, extension 221.

(Please print)		
Donor Name:		
Address:		<del></del>
City:	State:	Zip:
Telephone:		
(Check one)		
☐ In Memory of:		
☐ In Honor of:		
Whom should we notify	v?	
•	-	
City:	State:	Zip:
Ear which library?		
For which library?	An wales till a	
☐ Edwards Memorial, N	Tarshville	
☐ Main, Monroe		
☐ Union West Regional,	Indian Irali	
□ Waxhaw		
How would you like you	ur name or organization to appe	ar on the bookplate?
-		-
	Examples: Mr. and Mrs. John Jones, Mo	m and Dad, Everyone at
Should we colect the tit	tle, or will you provide it?	
	to the library's Collection Develo	anmont Policy
= = = = = = = = = = = = = = = = = = =		
□ Please select it for me	e. I am interested in these titles o	r this subject area:
Purchases will be ma	ade according to the following sc	ale. Please select one of the following choices.
□ \$40.00 Refere	nce or Genealogy	
☐ \$22.00 Adult F	Fiction, Non-Fiction, or Large Prin	t
□ \$20.00, Audio	books, DVDs	
□ \$15.00 Childre	•	
•	made out to Union County Public	c Library attached.
☐ Please bill me.	,	
☐ I provided the donate	ed item. Title:	
•		
Description of the	5 :	DIII C
Received by:	Date:	Billing Completed □