



A Gift In Memory or In Honor of

In Memory of _____

In Honor of _____

Donor Information (as it will appear on all acknowledgments)

Name(s): _____

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Gift Amount & Fund (Giftplate will be included in the material purchased)

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Please send acknowledgment to the honoree or family member listed

Name(s): _____

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Suggestion (title, author, subject) and/or special interest.

Gift Payment

My check is enclosed payable to: Wood County District Public Library Foundation

Please charge my credit card (Visa, MasterCard, or AmEx)

Name on card: _____

Card number: _____ Exp. Date: _____

Signature: _____

Mail this form with your check or credit card information to:

WCDPL Foundation
251 North Main Street
Bowling Green, OH 43402

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