



Centerville Library
111 W. Spring Valley Rd
Centerville, OH 45458
937-433-8091

Woodbourne Library
6060 Far Hills Avenue,
Centerville, OH 45459
937-435-3700

DONATION AND DEDICATION REQUEST FORM

Remember a loved one with a Memorial Gift to the Library or honor a family member or friend with a Tribute Gift to the Library. Tribute Gifts may be made for a birthday, anniversary, holiday or any special occasion. Your monetary donation will be used to purchase item(s) of your choice and donated material(s) may be added to our collection if they are suitable. A bookplate will acknowledge the honoree and donor if desired. Bring this completed form and your donation to the service desk at either location or mail the form and a check to the Washington-Centerville Public Library, Bookkeeping, 111 West Spring Valley Road, Centerville, OH 45458. If you have questions, please contact a Library Manager.

Donor's Name: Date:

Address:

Phone: Email:

Check One: Title* Subject Author * Library reserves the right to substitute a similar title if requested title is unavailable or not the best fit for the collection.

Enter title, subject, author information OR list titles donated (use back of form if needed):

Amount: (tax deductible) Check (write "donation" on check memo line) Cash Credit

Hold when ready? Yes No

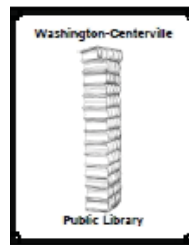
Donation Dedication? Yes, fill out information below No

Choose bookplate:

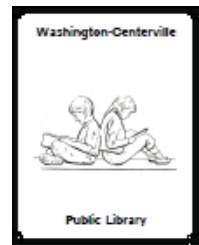
Library Logo



The Record



Story Time



Choose dedication type:

Memorial

Example:
In loving memory of
Jane Smith
From: Your Daughter,
Amy Smith
January 1, 2019

Tribute

Example:
Mr. and Mrs. James Smith
In honor of your
50th Wedding Anniversary
From: Your Loving Children
January 1, 2019

Other

Example:
Donated by
Donor Name
January 1, 2019

Personalize your dedication (maximum of 6 lines & 25 words):

LIBRARY USE ONLY: [Revised 9/19] TS_DON.pdf

Routing Monetary Donation: Form & Donation _____ Fiscal Officer _____ AS/YS/AV _____ Director _____ CR _____ TS

Routing Material(s) Donation: Form & Materials: _____ AS/YS/AV _____ Director _____ TS