



DONATION FORM FOR THE FRIENDS OF THE AGAWAM PUBLIC LIBRARY

Name: _____
Address: _____
City/State/Zip: _____
E-Mail Address: _____ Tel. #: _____

YES – I Would Like to Donate to the Friends of the Agawam Public Library

I would like to donate the following tax-deductible contribution of:

\$25 \$50 \$75 Other \$ _____

I am making this donation in the honor of:

Name: _____

I would like to have the following person notified of this donation:

Name: _____
Address: _____
City/State/Zip: _____

Upon receipt of the donation, we will send a letter to this person acknowledging that a donation was made in their name.

Please print out this form and mail the completed form and check to:

**FRIENDS of the AGAWAM PUBLIC LIBRARY
PO Box 478
Feeding Hills, MA 01030-0478**

Or drop them off at the Circulation Desk at the library

******* THANK YOU FOR CONTRIBUTING TO THE FRIENDS! *******