

**Mahomet Public Library District**

# Book Donation Form

Donor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Inscription (select one):**

- In honor of \_\_\_\_\_
- In memory of \_\_\_\_\_
- No inscription

**Genre (select one):**

- Adult Fiction  Adult Nonfiction
- Young Adult Fiction  Young Adult Nonfiction
- Children's Fiction  Children's Nonfiction

**Comments:** \_\_\_\_\_

\_\_\_\_\_ mahometpubliclibrary.org ph 217-586-2611 fax 217-586-5710

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