## LIBRARY FOUNDATION DONATION FORM

To make a tax deductible donation, please complete this form and mail it with your check to:

Summit County Library Fou	ndation		
PO Box 770			
Frisco, CO 80443			
Donor Information			
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City	State	Zip Code	
Phone			
E-mail			
Donation amount \$ I wish to remain and I would like my gift to support Greatest need Books and material Programming Other:	onymous. ort: s		
Does your employer match donations?			
Send us the organization's for	orm and your gift w	ill be twice as nice!	

## Memorial and Tribute Information (Optional)

Please fill out if gift is being given in honor or memory of a loved one or friend.

In memory of			
In honor of			
On the occasion of (if applica	ble)		
Please notify (gift amount wil	l not be disclosed):		
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City	State	Zip Code	
Thank You!			