



Donation Form

I/We _____ would like to make a donation to the Sault Ste. Marie Public Library.
Please print name(s)

Date of Donation: _____

Please check type of Donation.

Special Occasion in Honour of _____
Please print name(s) Occasion

In Memory of _____
Please print name(s)

General Donation

Please send a card acknowledging this gift to: (Amount of donation will not be disclosed)

Name: _____ Address: _____

City: _____ Province: _____ Postal Code: _____

Please send a tax receipt to: (A receipt for Income Tax purposes will be issued for donations of \$10.00 or more)

Donor's Name: _____ Address: _____

City: _____ Province: _____ Postal Code: _____

Donation amount: \$ _____ Cheque enclosed (Payable to the Sault Ste. Marie Public Library)

The library publicly acknowledges its donors. Please check if you prefer to remain anonymous.

I would like my donation to be applied toward the following branch:

Main Branch Churchill Branch Korah Branch No Preference

I would like my donation to buy books in the following category:

No Preference Biography & History Health & Well-being
 Business & Finance Children's Classics & Picture Books Leisure & Recreation
 Science & Technology Other: _____

Mail completed form with payment to: **Sault Ste. Marie Public Library**
50 East Street
Sault Ste. Marie, Ontario, P6A 3C3