



**Tom Green County  
Library System**

*San Angelo, TX*

*Serving know-it-alls since 1921.*

**Finance Use Only:**

Fund Code # \_\_\_\_\_

## Monetary Donation Form

### DONOR INFORMATION

Donor Name: \_\_\_\_\_

Donor Address: \_\_\_\_\_

Donor Telephone: \_\_\_\_\_

Date: \_\_\_\_\_

Amount: \$ \_\_\_\_\_  Cash  Check  Credit

### TYPE OF GIFT

1.  Library Support

General  Stephens Central  Angelo West Branch  North Angelo Branch

Specific department or program: \_\_\_\_\_

2.  Library Materials

General  Stephens Central  Angelo West Branch  North Angelo Branch

Specific collection, type, or subject: \_\_\_\_\_

### ACKNOWLEDGEMENT INFORMATION

Bookplate Desired:  Yes  No Number of bookplates (one bookplate for every \$25) \_\_\_\_\_

Gift From  Memorial to  Honoring Name: \_\_\_\_\_

Person to be notified: \_\_\_\_\_

Address: \_\_\_\_\_

### STAFF ACCEPTING DONATION

Completed by: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_