224 N. O'PLAINE ROAD, GURNEE, IL 60031 • 847-244-5150 • WWW.WNPL.INFO Gifts to the Library

Submit completed form to WNPL Administration Office.		Date	Date:			
Attach check # or \$			Staff	Member:		
I would like to give a gift	□ in mem	nory of				
	□ other (please specify)				
Gift Given by:						
NAME			NAME			
Address			Address			
CITY STATE	Zif	p	CITY	State	Zip	
<i>Please use this gift</i> □ as	the Library	sees fit				
□ for	a book in th	ne suggested su	bject area:			
□ oth	er (specify,	please)				
A g	ift to the End	owment Fund con		e Endowment Fun re of the Library. The projects.		
□ Please do not send ackno Please send acknowledge		nt for my gift of I	ess than \$250.			
NAME			NAME			
Address			Address			
Сіту	State	ZIP	CITY	S	STATE	ZIP

Money received \$	□ Fund set up (if needed)	□ Forward to selector
 Thank you sent Title selected List title(s) received: 	 Acknowledgement sent to family Title received 	☐ Bookplate inserted