

BOOK DONATION

I wish to purchase a book(s) to be added to the Library's collection. (\$30.00 minimum).

My name: _____ Phone:# _____

Address: _____ e-mail _____

I want the book plate to read (check one): ___ In Memory of ___ In Honor of

Name: _____

Presented by: _____

Please send a notification of this book donation to:

Name: _____ Relationship: _____

Address: _____

Enclosed is my check for \$_____ made payable to: **Orange County Library System.**

Mail to: Community Relations
 Orange County Library System,
 101 E. Central Boulevard,
 Orlando, FL 32801

For more information, call 407-835-7481.