



MILAN-BERLIN LIBRARY  
DISTRICT

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

Memorial For: \_\_\_\_\_

Send acknowledgment to:

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Person's Interests or Hobbies

Amount

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Check Number

\_\_\_\_\_

Memorial Given By:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***FOR OFFICE USE ONLY:***

Book Title(s):

\_\_\_\_\_

\_\_\_\_\_

Thank You Date \_\_\_\_\_

Acknowledgment Date \_\_\_\_\_