## LAKE AGASSIZ REGIONAL LIBRARY DONATION FORM

DONOR INFORMATION	
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Enclosed is my gift of \$	This is a special gift:
to support LARL library services.	□ In Memory of:
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$\hfill \square$ Where the need is greatest	
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☐ Endowments	
☐ Adult Programs	Names(s):
□ eMaterials	Address:
☐ Branch:	City / State / Zip:
□ Other:	Phone:
GIFT PAYMENT  Mail a cash or check contribution with this form:	
□ Check is enclosed. □ Cash is enclosed. □ K	eep my gift anonymous.
☐ Exclude my name from donor acknowledgeme	ent publications.
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