Commemorative Gifts

Remember a loved one or celebrate a milestone with a monetary donation to the library for a gift book (or other material for the collection).

In recognition of the person being honored, a personalized book plate will be added to the item.

Donor Information						
Name:						
Address: _						
Phone:		Email:				
I would like to	contribute:					
O \$15 (for you	uth book)	O \$25 (for an adult or teer	ı book)	Other am	nount:	
Dedication Information						
O In Honor of		O In Memory of	•	O In Celebr	ration of	
Name of person being recognized on book plate:						
Please include "A Gift from [Donor Name]" on book plate: OY						
What genre/subject should our Librarians keep in mind while making their selection?						
Acknowledgement Information						
Please complete this section if you would like us to notify the person or family of the person being honored.						
Name/Relationship to Honoree:						
Address: _						
_						
O Do not reveal the amount (amount of gift will be noted unless this box is checked)						

Payment and form must be submitted together. Commemorative Gift donations can be made by cash or by check at the Check Out Desk. Please make checks payable to **Batavia Public Library**.

If you are mailing your donation, please mail to:
Administration Office
Batavia Public Library
10 S. Batavia Ave.
Batavia, IL 60510



General, Unrestricted Long-Term Support of the Library

A gift to the Library is a lasting contribution to the entire community.

Those who donate \$250 or more are recognized on the Giving Tree in the Library lobby.

Donor Information					
Name:					
Address:					
Phone:	Email:				
I would like to contribute	e :				
O \$50	O \$100	Other amount:			
O \$250 (Bronze Leaf)	O \$500 (Silver Leaf)	• \$1,000 (Gold Leaf)			
O \$2,500 (Small Stone)	O \$5,000 (Medium Stone)	O \$10,000 (Large Stone)			
D	edication & Acknowledgem	ent Information or more)			
A Gift from:					
O In Honor of	O In Memory of	O In Celebration of			
Person being recognize	d:				
Other dedication statem	ent:				
Please complete the section	on below if you would like us to notify the	e person or family of the person being honored.			
·					
Name/Relationship to n	onoree:				
Address:					
	_				
O Do not reveal the amoun noted unless this box		would like to remain anonymous			

Payment and form must be submitted together. Donations can be made by cash or by check at the Check Out Desk. Please make checks payable to **Community Foundation of the Fox River Valley** with **Batavia Public Library** in the memo.

If you are mailing your donation, please mail to:

Administration Office Batavia Public Library 10 S. Batavia Ave. Batavia, IL 60510

