

Donation Form

Thank you for your donation to Portage District Library! Please print and complete this form. You may bring the form along with your check to any Portage District Library service desk or mail it to:

Portage District Library | c/o Library Director Christy Klien | 300 Library Lane | Portage, MI 49002

Donor Information:		
Name:		□ I wish to remain anonymous
Address:		
City:		
E-mail:	Phoi	ne:
Gift Information:		
Enclosed is a check for \$		
Optional:		
My gift is in honor of:		
on the occasion of:		
OR My gift is in memory of:		
Please send an acknowledgement to:		
Name:		
Address:		
City:	State:	Zip:
Relationship to honoree:		
Requested use for donation funds: (Pleas	e make these checks payable	e to Portage District Library.)
□ Adult Services □ Youth Services □ Heri	tage Room 🛮 Please use	my gift for the area of greatest need.
Subject Area of Interest:		
If you choose to contribute to one of our er account with the Kalamazoo Community Fo (Please make these checks payable to Kalamazo	oundation, ensuring financi	•
☐ General Endowment Fund: Income helps	s the library address areas	of need as they arise.
☐ Grandmother and CIG Endowment Fund opportunities beyond the library's regula		and teens with programs and
For office use only: Donation received by:	Ε	Pate: