Kelley Library Donation Form			
This donation is for:			
Memorial	Birthday	Anniversary	Other
I wish to make a memorial donation in honor of:			
NAME:			
PRESENTED BY:			
ADDRESS:			
PLEASE SEND NOTIFICATION TO (OPTIONAL):			
NAME:			
ADDRESS:			
SUGGESTION FOR USE, TOPICS OF INTEREST (OPTIONAL)			
AMOUNT ENCI	LOSED:		Please make check payable to Kelley Library