



Donation Form

Amount

\$1,000.00 \$500.00 \$100.00 \$75.00 \$50.00 Other

Additional Information *(Optional)*

Personal Corporate Comments _____

Tribute Information *(Optional)*

Memorial/Honorarium

First _____ Last _____

Mail Letter to:

First _____ Last _____

Street Address _____

City _____ State ____ Zip _____

Email _____

Matching Gifts

My Company will match my donation. Company Name _____

Donor Information

First Name _____ Last Name _____

Street Address _____

City _____ State ____ Zip _____

Email _____

Please make check payable to Escondido Library Foundation and mail to:

Escondido Library Foundation
239 S. Kalmia Street
Escondido, CA 92025