

Donation Form

I would like to be a program sponsor.

- \$25 individual sponsorships
- \$100 Corporate sponsorships
- \$250 Corporate Sponsorship
- \$500+

I would like to become a Library Lover.

_____ Monthly Amount

I would like to become a member of the Independence County Library Friends Foundation.

- \$25 Individual (yearly)
- \$100 Corporate (yearly)
- \$500 Lifetime

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: _____