

Jefferson Public Library

Donation Form

Complete and return to:

Library Director

Jefferson Public Library - 321 S. Main Street - Jefferson, WI 53549

Name: _____

Phone: _____

Address: _____

Email: _____

Donation Amount: \$ _____

I wish to remain anonymous

Donation Type:

One-time Donation

Recurring Donation

Planned Giving

Special Occasion

Let us know how you would like to recognize your special person or event.

Celebrate a birthday or anniversary _____

In memory/honor of a loved one _____

In celebration of an achievement _____

Other _____

Please direct my donation to:

Jefferson Community Foundation - Jefferson Public Library Fund

Programming

Collection

Greatest Need

*Thank
you!*

