

# Carnegie Library of McKeesport

1507 Library Avenue, McKeesport, PA 15132  
Telephone: 412-672-0625

## Memorial/Honorarium Form

### **Please Print**

In **Memory/Honor** of: (circle one) \_\_\_\_\_

**Date:** \_\_\_\_\_ **Request taken by:** \_\_\_\_\_

**Donor:**        *Name* \_\_\_\_\_

*Address* \_\_\_\_\_ *Phone#* \_\_\_\_\_

**Please Notify:**    *Name* \_\_\_\_\_

*Address* \_\_\_\_\_

**Contribution:** \$ \_\_\_\_\_ *for:*

1. **Memorial Fund** \_\_\_\_\_ **Honorarium Fund** \_\_\_\_\_  
(If book with book plate requested the minimum contribution is \$35.00)
2. **Adopt a Magazine** \_\_\_\_\_ (Minimum of \$25.00)
3. **Giving Tree Leaves:** (McKeesport Only)

**Single Name (\$1,000)** \_\_\_\_\_

**One of two names (\$500)** \_\_\_\_\_

**One of three names (\$100)** \_\_\_\_\_

**Please choose one of the following locations for your contribution:**

**McKeesport** \_\_\_\_\_ **White Oak** \_\_\_\_\_ **Elizabeth Forward** \_\_\_\_\_ **Duquesne** \_\_\_\_\_

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### **Staff Purpose Only**

Donor Receipt \_\_\_\_\_ Family Notification \_\_\_\_\_

Memorial Book Entry \_\_\_\_\_ Book Plate \_\_\_\_\_

### **PURCHASES:**

Titled Ordered \_\_\_\_\_ Author \_\_\_\_\_

Title Received \_\_\_\_\_ Date Received \_\_\_\_\_

**Comments/Plate:**

\_\_\_\_\_  
\_\_\_\_\_