



One-time Donation Form

Donor First and Last Name _____

Mailing Address _____

City _____

State _____

Zip Code _____

Email Address _____

Phone Number _____

This one-time contribution to Friends of SaddleBrooke Libraries is being made:

To honor _____ (name)

in recognition of _____

Honoree's Mailing address _____

City _____

State _____

Zip code _____

In memory of _____ (name)

Please send notification of this gift to _____ (name)

Mailing address _____

City _____

State _____

Zip code _____

Another reason (please specify) _____

Please keep my donation anonymous

This is a donation that qualifies for a matching gift from

_____ (company name)

Please complete this form and mail it, along with a check made payable to *Friends of SaddleBrooke Libraries* to:

Friends of SaddleBrooke Libraries, PO Box 8844, Catalina, AZ 85738

Thank you for supporting Friends of SaddleBrooke Libraries! Your contribution helps fill our shelves and is a 501(c)3 tax deductible.