



Donation Form

Name (as you wish it to appear): _____

Address: _____

City: _____ State: ____ ZIP: _____

Phone: (____) ____ - ____ Email: _____

I prefer to remain anonymous to the public.

My check in the amount of _____ is enclosed.

Please use my monetary gift to support: (choose one)

Projects, books, or materials as needed New books

Programs Specific request: _____

This gift is made in (honor / memory) of: _____

Please notify this family/person of my gift:

Name: _____

Address: _____

City: _____ State: ____ ZIP: _____

Please write your check payable to Christian County Library and mail it to:

Christian County Library

208 McCroskey St

Nixa, MO 65714

Thank you for your kind donation.

If you need to get in touch, you can reach the Library Director at (417) 724-6100, or you can contact us by email at info@christiancountylibrary.org.