

Donor Information: Please complete the information below, and enclose with your donation.

Enclosed is a gift of \$ _____ to the Andover Public Library. I/We wish the gift to go to the following category (as described above):

- General – Library determines where need is greatest
- Specific – supports current and future building costs
- Collegiate – please indicate a school:
 - Wichita State University
 - Kansas State University
 - University of Kansas
- Dedicated Book
- Bequest – I wish to include the Library in my will
- Memorial or Tribute – please provide additional information:
 - In Memory of: _____
 - In Honor of: _____

Person to be notified of gift:

Name _____

Address: _____

City: _____ State: _____ Zip: _____

Please send acknowledgement to:

Donor's Name: _____

Donor's Address: _____

City: _____ State: _____ Zip: _____

We wish to remain anonymous

Please make checks payable to:

Andover Public Library
1511 East Central Avenue
Andover, KS 67002
Attention: Karyn Schemm

If using a credit card, please provide the following information:

Name (as it appears on card): _____

Billing address: _____

City: _____ State: _____ Zip: _____

Card Number: _____

Expiration Date: _____ Security Code # on back of card: _____

For questions or assistance, please contact Karyn Schemm at 316-558-3500, extension 22.