



Book Donation Form

Please fill out the following information. Note that there is a waiting period of 2-8 weeks for books to be added to our collection due to publishing, shipping, and processing time.

DONATING TO: Rostraver Public Library Smithton Public Library

IN MEMORY/HONOR/CELEBRATION OF: _____
(Circle one) First Name Last Name

OR

GENERAL DONATION - DONATED BY: _____
First Name Last Name

AMOUNT (suggested \$35/adult book and \$25/children's book): \$ _____ CASH / CHECK
(Circle one)

SUGGESTED TITLE OR SUBJECT: _____ Librarian's choice

BOOK AUDIENCE: Adult Children Any

GIVEN BY:

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Email (optional): _____

Would you like to receive a letter stating which books were added to our collection? YES / NO
(Circle one)



NOTIFY:

Name: _____



Address: _____

City, State, Zip: _____

**Please complete the following as you wish it to appear book plate:
(we will specify “in memory, honor, or celebration of” and
the library based on your selection above)**

	- Donated in _____ of -	
	- By -	
	To the Rostraver Public Library	

Or, for a general donation:

	- Donated by -	
	To the Rostraver Public Library	

Rostraver Public Library - 700 Plaza Drive Rostraver Township, PA 15012 724-379-5511

Smithton Public Library - 615 Center Street Smithton, PA 15479 724-872-0701

rostraver@wclibraries.org and smithton@wclibraries.org

Office use only:

Date: _____ Payment received ___ Notice card ___ Book plate ___ Items received ___ Letters sent ___

Title(s): _____