

**Joseph & Elizabeth Shaw Public Library
Memorial Donation Form**

Please fill out the form below and then bring it with you to the library
or mail it to:

1 South Front Street, Clearfield, PA 16830

- \$1-\$24 goes toward the memorial fund
- \$25 and up purchases a book plate:

Donor Name _____

Donor Address _____

\$Amount _____

Donor Phone Number _____

- In Memory of:
- In Honor of:

Name: _____

Send acknowledgement to:

Name _____

Address _____