



SALEM FREE PUBLIC LIBRARY DONATION RECEIPT

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____

I HEREBY DONATE ITEMS SUBJECT TO THE LIBRARY DONATION POLICY:

_____ Books, DVDs, audiobooks, CDs _____ Other

**THE SALEM LIBRARY GRATEFULLY ACKNOWLEDGES THE GIFT OF MATERIALS TO
SUPPLEMENT THE COLLECTIONS AND ENHANCE SERVICE TO THE PUBLIC.**

RECEIVED BY _____ DATE _____
Name Title

ESTIMATES OF FAIR MARKET VALUE ARE THE RESPONSIBILITY OF DONOR.