



Materials Donation Agreement Library Record

Date of Donation:

(Donations are accepted Monday through Saturday, 9:00 a.m. - 5:00 p.m., Sunday 1:00 p.m. – 4:00 p.m.)

A donation of (list quantity)

Hardcover books _____

Softcover books _____

DVD _____

CDs _____

Estimated value: _____ (to be provided by donor) Has been received from

Name: _____

Address: _____

City/State/Zip _____

Phone: _____

I, the donor, understand that the library will make disposition of the donated materials in accordance with the Library Collection Development and donation procedures. I also understand the library cannot provide accurate inventory of material nor guarantee the return of any material once it is formally accepted. Containers left with the donated items will be disposed of accordingly.

Donor Signature _____ Date _____

Materials Donation Agreement Customer Record

_____ has donated to the Pickerington Public Library

A donation of (list quantity)

Hardcover books _____

Softcover books _____

DVD _____

CDs _____

Estimated value: _____ (provided by donor)

Library staff signature _____ Date: _____

