



MEMORIAL PROGRAM

Northland Public Library Foundation

Enclosed please find a check for: \$ _____

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Presented in memory of:

_____ (name of person as you wish it to appear on bookplate)

Areas of interest: (check all that apply)

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Audio/Visual

Interior Decoration

Fantasy

Biography

Large Print

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Business

Literature/Poetry

Travel

Children's

Medicine

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Cooking

Music

Other _____

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Name of donor(s) as you wish it to appear on bookplate:



Please furnish donor's address for acknowledgement:

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Please send your check and form to:

Northland Public Library Foundation

Memorial Program

300 Cumberland Road

Pittsburgh, PA 15237

for staff use only

Date _____

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