

SPECIAL GIFT TO OHIOANA FORM

In Memory of \_\_\_\_\_

In Honor of \_\_\_\_\_

Occasion \_\_\_\_\_

Ohioana will notify the individual that a gift has been given in their honor or the family of the individual for whom you have given a gift in memory of. Please provide the following information so that a card can be sent.

Name \_\_\_\_\_

Address \_\_\_\_\_  
Street Apt.

\_\_\_\_\_ City State Zip

**Gift From:** \_\_\_\_\_  
First name Last name

\_\_\_\_\_ Address Apt.

\_\_\_\_\_ City State Zip

\_( ) \_\_\_\_\_  
Phone email

Check is enclosed for \$\_\_\_\_\_ (make payable to the Ohioana Library)

Please charge to my:

Visa     MasterCard     American Express     Discover

Credit Card # \_\_\_\_\_

Signature \_\_\_\_\_

Print this out and mail to the: Ohioana Library  
274 E. First Ave., Suite 300  
Columbus, OH 43201