



# SPONSOR LIST

I am pleased to know that I will be helping to support the **Lake County Public Library Foundation** by pledging the following sum for EVERY BOOK READ. I understand that the reader may read as many or as few books as he/she chooses

SPONSOR'S NAME	SPONSOR'S ADDRESS	PHONE	Amount Per Book	Total Pledges
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				

**TOTAL AMOUNT COLLECTED \$** \_\_\_\_\_

## PLEASE COMPLETE

Child's Name \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 School \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_  
 Teacher \_\_\_\_\_

# BOOK LIST RECORD

TITLE OF BOOK	PARENT SIGNATURE
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
14.	
15.	
16.	
17.	
18.	
19.	
20.	
21.	
22.	
23.	
24.	
25.	
26.	
27.	
28.	
29.	
30.	

Additional Sponsor List & Book List Record envelopes are available at your school or public library.

### RETURN COMPLETED

Sponsor/Book List Record envelope with money enclosed to your school by the deadline.

Make checks payable to: **LCPL FOUNDATION**