

The Commemorative Book Program

The University of Medicine and Dentistry of New Jersey
University Libraries' Commemorative Book Program

The UMDNJ-University Libraries' **Commemorative Book Program** offers an opportunity to honor an individual through a meaningful and enduring gift to the University's educational, informational, and research resources. Commemorative contributions may be made "in honor of...", or "given on the occasion of", such as graduation, retirement, anniversary, or "in memory of...". Specially designed commemorative bookplates, suitably inscribed, will be placed in books acquired through the program.

Donations will be used to purchase a book(s) for the collections of the University Libraries and may be designated for the campus library of your choice. To contribute to the **Commemorative Book Program**, complete the attached form, enclose a check and mail to **Commemorative Book Program** at that library.

Each contributor will receive a letter of acknowledgment. The **Commemorative Book Program** will announce the gift to the honoree or his/her family if requested by the donor.

A gift to the **Commemorative Book Program** will be a lasting tribute to the educational and research goals of the University of Medicine and Dentistry of New Jersey's University Library System, and to the individual you select to be honored.

Newark Campus

UMDNJ-George F. Smith Library
of the Health Sciences
30 Twelfth Avenue
University Heights
Newark, New Jersey 07103-2754
(973) 972-4353

New Brunswick/Piscataway Campus

UMDNJ-Robert Wood Johnson Library
of the Health Sciences
One Robert Wood Johnson Place
New Brunswick, New Jersey 08903-0019
(732) 235-7606

Stratford Campus

UMDNJ-Health Sciences Library at Stratford
One Medical Center Drive
Stratford, New Jersey 08084-1390
(856) 566-6800

Camden Campus

UMDNJ-Coriell Research Library
401 Haddon Avenue
Camden, New Jersey 08103-1505
(856) 757-7740

Book Donation Made:

in honor of in memory of

on the occasion of _____

Name of individual _____

Presented by _____

Categories:

\$25 \$50 \$75

\$100 \$150 \$200

Name of Library _____

Do you have a preference of medical specialty/subspecialty topic? If so, please indicate:

Your Name _____

Your Mailing Address _____

Letter of acknowledgement also to be sent to:

Enclose check payable to the UMDNJ Library you have selected.

All contributions are tax deductible.