OREGON LIBRARY ASSOCIATION DEPOSIT FORM	
Date:	
Name:	
Address:	
Phone Number:	
Committee:	
Budget Line to be used for deposit:	
Memo (For OLA Financial Reports):	
Total Deposit:	
Please include copy of top portion of form with d	leposit
Memo (Description)	Amount
Total	\$
Submit to:	
Shirley Roberts	Questions or Problems:
Oregon Library Association	Valery King
PO Box 3067	OLA Treasurer
La Grande OR 97850	Oregon State University Library
Phone: (541) 962-5824	Phone: (541) 737-7318
Fax: (541) 962-3335 sroberts.ola@gmail.com	valery.king@oregonstate.edu
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