African Library Project
Book Packing Slip
(1 per box)

Complete one form for each box. Place this form inside the box on top of the books. This is the way your library project knows who sent their books.

Date: ________________________

To: (African partner name)

From: (U.S. book drive organizer’s name, address, other contact information)

This box contains (#)______________ books.

We send the following personal message (optional):