

RIF Book Fund Form

Organization/Program S	te Name:	
Shipping Address (No PO Boxes):		
Shipping Address 2:		
City, State Zip:		
Primary Contact Person	:	
Email:		
Phone:		
Book Information: Themes That Best Meet apply):	Your Needs/Interest of	the Children at your Site (Check all the
Adventure Biography Fantasy Graphic Novels Sports	Board Books	r BooksBilingual/SpanishContent Area/Non-FictionFolk/Fairy TalesPoetryVisual & Performing Arts
Please List the Number	of Requested Books in	Each Grade Level:
Early PreK _	14	Middle School
PreK	5	High School
K	6	
Total Books Needed:		mber of Books Requested):

Please send this form to literacynetwork@rif.org. RIF will contact you to finalize payment.

Once payment is received, your book allocation will be uploaded into our online storefront.