## **CAPITAL CAMPAIGN DONOR GIFT AGREEMENT**



I/we wish to make a contribution to the North Shore Library in support of the Capital Campaign!

Gift or Pledge Information	
contribute the sum of: \$	e used to support the new North Shore Library and hereby agree toTotal (Gift or Pledge)
My first pledge payment of \$	is included (payable to: Friends of the North Shore Library)
The remaining balance of \$	will be paid over a period of:
□1 year □ 2 years □ 3 years □ Other	r
Thereafter, payments on my pledge will be ma	ade: □ Quarterly □ Semi-Annually
☐ Annually ☐ Other	
<b>Donate by Credit Card:</b> If you prefer to use a cinfo listed below) to make your gift via our sec	credit card, please contact Rhonda Gould, Library Director (contact cure site.
<b>Donor Information</b> Name(s)	
Address	
Phone	Email
Donor Recognition  We consider it an honor to recognize our done let us know how you'd like your name to appe  □ I wish to remain anonymous □ I wish	, , , , , , , , , , , , , , , , , , , ,
I am interested in the following Naming Opp	ortunity (subject to availability):
☐ This gift is in honor of/memory of (circle	one):
Signature:	Date:

## For additional information, contact:

Rhonda Gould, Library Director at 414-351-3504 or <a href="mailto:rhonda.gould@mcfls.org">rhonda.gould@mcfls.org</a>

Mail to: North Shore Library Campaign, 6800 N. Port Washington Rd, Glendale, WI 53217

Visit our website: www.northshorelibrary.org

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