



OREGON
LIBRARY CAMPAIGN
ENGAGING • GROWING • LEARNING

DONOR INFORMATION

NAME(S)

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CITY/STATE/ZIP

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GIFT & PLEDGE INFORMATION

I/We would like to make a total gift of \$_____ to the Oregon Public Library for the new library.

Single Payment (Enclosed) Check payable to: Oregon Public Library

Multiple Installments to be made over: 1 year 2 years 3 years Other _____
First Payment is: Enclosed Will be made on/before ____/____/____

Future payments will be made: Annually Semi-Annually Quarterly
 Other _____

Signature: _____ Date: _____

DONOR RECOGNITION

We consider it an honor to recognize our donors for their support.
Please let us know how you'd like your name(s) to appear in any donor recognition opportunities.

I/we wish for our name(s) to be listed as (please print): _____

I/we wish to remain anonymous.

I am interested in the following Naming Opportunity (subject to availability): _____

Please designate my gift: In Honor of: In Memory of: _____

THANK YOU FOR SUPPORTING OREGON PUBLIC LIBRARY!

Please return to: **Oregon Public Library, Attn: New Building Fund**
256 Brook Street. Oregon, WI 53575

FOR ADDITIONAL INFORMATION, CONTACT

Jennifer Endres Way • Library Director, at **608-835-2322** or **jway@oregonlibrary.org**.

Your contribution is tax-deductible to the fullest extent allowed by the law.