

Pledge Form



Donor Information (please print or type)

Name _____
Billing address _____
City, ST Zip Code _____
Phone 1 | Email _____

Pledge Information

I (we) pledge a total of \$_____ to be paid: now monthly quarterly yearly.

I (we) plan to make payment(s) on the following basis, understanding that I (we) can do so on a multi-year schedule if I (we) choose:

Amount	Date

I (we) plan to make this contribution in the form of: cash check credit card other.

Credit card type | Exp. date _____

Credit card number _____

Authorized signature _____

Gift will be matched by (company/family/foundation) _____

form enclosed form will be forwarded

Acknowledgement Information

Names(s) to be used in all acknowledgements: _____

I (we) wish to have our gift remain anonymous.

Signature(s)

Date

Please make checks, corporate matches, or other gifts payable to:
Garnet A. Wilson Public Library of Pike County • 207 N. Market Street • Waverly, OH 45690