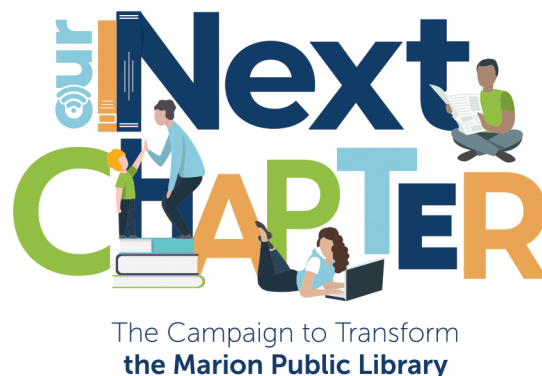


# Pledge of Intent to Support THE MARION PUBLIC LIBRARY



Donor Name(s): \_\_\_\_\_

Email Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: (office) \_\_\_\_\_ (home) \_\_\_\_\_  
(cell) \_\_\_\_\_

☐ I/We pledge a TOTAL of \$ \_\_\_\_\_ to the Marion Public Library capital campaign.

Enclosed please find \$ \_\_\_\_\_

The remainder of this commitment will be fulfilled with payments of \$ \_\_\_\_\_,

which will be contributed: ☐ annually ☐ semi-annually ☐ quarterly ☐ monthly

for: ☐ 1 year ☐ 2 years ☐ 3 years (You will be sent a reminder.)

☐ My/My spouse's company will match my/our gift: \_\_\_\_\_  
Company Name(s)

☐ Please contact me about a stock or other form of gift.

Individual name(s) or organization name to be listed for gift recognition as you want them to appear:

\_\_\_\_\_

My gift is ☐ in honor of or ☐ in memory of \_\_\_\_\_

☐ I/We would like our gift to be recognized through a naming opportunity of:

\_\_\_\_\_

☐ I/We would like our gift to remain anonymous.

Signature(s) \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

**Make gift(s) payable to:** Marion Public Library  
1064 7th Avenue  
Marion, IA 52302  
MarionPublicLibrary.org

*Contributions to the Marion Public Library  
Foundation, a 501(c)(3) nonprofit organization,  
in support of the campaign are tax-deductible to  
the greatest extent of the law.*