



Pledge form.

**I am/We are pleased to support the campaign
for the Waukesha Public Library.**

It is my/our intent to give \$_____ to be paid over:

☐ one year ☐ three years ☐ five years

as follows:

☐ annually ☐ semi-annually
☐ quarterly ☐ monthly
☐ one-time gift ☐ other:

I/We would like to begin my/our payments on ____/____/ 20 ____.

Enclosed is the first payment of \$_____

Subsequent payments will begin on ____/____/ 20 ____.

Please send me/us payment reminder notices.

- ☐ I/We prefer this gift to remain anonymous.
☐ I/We would like to arrange for automatic deductions.

Please contact me/us for bank account information.

This gift will be matched by: _____

(company name)

- ☐ The form is enclosed.
☐ The form will follow.





Special instructions.

Recognition Opportunity Request:

☐ Gift in Honor of:

☐ Gift in Memory of:

Name: _____
(Please print name(s) as you would like it/them to appear in recognition materials.)

☐ Personal Gift:

☐ Corporate Gift:

Donor(s) Name: _____

Title: _____

Company/Organization: _____

Address: _____

Email: _____

My Check (payable to WCCF—Waukesha Public Library Fund) is enclosed.

I will make a credit card gift through the Waukesha County Community Foundation website: wccf.fcsuite.com/erp/donate/create?funit_id=1112

Credit Card Gift:

Please check one: ☐ Visa ☐ MC ☐ Discover ☐ Amex

Number Exp. _____ Date: ____/____/20____ CSV Number: _____

Signature: _____ Date: ____/____/20____.

The Waukesha County Community Foundation is a 501(c)(3) nonprofit organization, incorporated in the State of Wisconsin. Gifts to the WCCF are tax-deductible to the full extent allowed by law.

QUESTIONS? Contact Bruce Gay. Phone: 1-(262)-524-3681 Email: bgay@waukesha-wi.gov THANK YOU!