



For DPL Accounting: Payment Rec'd by: _____ (Initial) Date: _____

2016-2017 Capital Campaign Pledge Form

YES! I acknowledge the need for a renovation of the Adult Department of the Dover Public Library. I pledge support to the Library's Capital Campaign, to ensure successful completion of project.

Enclosed is my/our first payment of \$ _____ . (I understand that pledges must be paid in full by December 31, 2017).

The balance/remainder will be payable to DPL over the next: _____ 1 Year _____ 2 Years

Preferred installment schedule for balance due (donors will be invoiced accordingly):

_____ Monthly, in payments of \$ _____ each.

_____ Quarterly, in payments of \$ _____ each.

_____ Annually, in 2 equal payments, payable by _____ (month) each year.

Signature: _____ **Date:** _____

Please Complete Donor Contact Information:

Name: _____ **Phone Number:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Email: _____

_____ *Please contact me about naming opportunities.*

_____ *This gift is to be recognized as "anonymous."*

Mail To: Dover Public Library 525 N. Walnut St. Dover, OH 44622
