



Annual Gift Pledge Form

Thank you for your commitment to the Cedar Rapids Public Library Foundation. Your gifts support our Library's efforts to meet the needs of our community.

Name(s): _____

Address: _____

Email: _____ Phone: _____

I/We are pleased to make an annual gift of \$_____ over the next

___ 2 years ___ 3 years ___ 4 years ___ 5 years

Please send reminders in _____ (month) annually.

I/We will fulfill this commitment through the following payment method:

___ Please send a formal invoice to the name and address listed above.

___ Check. Please find enclosed our first installment.

___ Credit Card. Please charge this card upon receipt of this form and again accordingly per the terms (month/years) selected above.

Type: ___ MasterCard ___ Visa ___ Discover ___ AmEx

CC# _____ Exp. Date: _____

Name on Card: _____ CVC: _____ (3-digit code)

Please share how you would like to be listed in the Library Foundation's annual report and other venues for recognition.

___ I/we wish this gift to be anonymous.

Please mail your check payable to the CRPL Foundation to:

Cedar Rapids Public Library Foundation
450 5th Avenue SE
Cedar Rapids, IA 52401

If you have any questions, please call Charity Tyler at 319.739.0411 or email TylorC@CRLibrary.org.