

Yes! I/We wish to make a gift to help the Ripon Public Library *Think Outside the Books!*

Gift Information	Total amount of gift/pledge: \$								_
	Initial payment (en	closed check or c	redit card b	elow):			\$		_
	Balance:						\$		_
	Balance payable ov	ver: 🛭 1 ye	ar 🗆	2 years		3 years	☐ 4 years	☐ 5 years	
	I wish to have this						on (date)		
	- Wish to have this				ecognitic		chosen or any other	gijt injormation.)	
Donor Information	Name(s):								
	Address:								_
	City:				St	ate:	Zip:		_
	Phone:		Em	ail:					_
Payment Information	☐ Check enclose	d <mark>(payable to: Oshk</mark>	osh Area Con	nmunity Found	<mark>lation; i</mark>	ndicate Ripon	Public Library Renova	ation on memo lin	<mark>e)</mark>
							donate/create/fund		
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Donor Recognition	For donor recognition, I understand my name/company will be listed as above or as follows:								
	☐ I/We wish my/our gift to remain anonymous.								
	☐ This gift is for the 100 Extraordinary Women campaign. [https://100extraordinarywomen.com/ripon-public-library/]								
	☐ My/Our gift is ☐ in honor of ☐ in memory of:								
Thank You!	Mail this form (and payments by check) to:				For more information contact:				
	Oshkosh Area	Oshkosh Area Community Foundation			Desiree Bongers, Library Director, Ripon Public Library				
	•	Ripon Public Library Renovation Fund 230 Ohio Street Suite 100			120 Jefferson Street Ripon WI 54971				
	Oshkosh WI 54902				920-748-6160				
	Or, drop off yo	our form & payme	ent at the Rip	oon Public lib	rary.				
	Thank you for	Thank you for your gift to the Ripon Public Library!							

All gifts are tax deductible to the fullest extent of the law. Gifts will be used specifically for the "Think Outside the Books" fundraising campaign to refresh both the indoor and outdoor space at the library.