



Sun Prairie Public Library Foundation
1350 Linnerud Drive
Sun Prairie, WI 53590
sunlibfoundation.org

Next Chapter Capital Campaign Pledge Form

Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: _____

Preferred name(s) for donor recognition: _____

I/we pledge to give a total of \$_____ to support the Sun Prairie Public Library Expansion Project Capital Campaign over a period of:

1 Year 2 Years 3 Years 4 Years 5 Years

In increments of \$_____ made Monthly Annually

Starting in (Month, year): _____

Please send pledge reminders Yes No Beginning: _____

Pledges totaling \$1,000 or more, qualify for the *100 Extraordinary Woman* list. Please include the following name on that list: _____

Allocate _____ to the endowment to maintain the new space and high level of service within the Sun Prairie Public Library.

Signature: _____ Date: _____

Signature: _____ Date: _____

To stay informed on project developments visit www.sunlibfoundation.org/nextchapter

Thank you for supporting the Sun Prairie Public Library Expansion Project!