DONATION FORM

Thank you for your contribution to the Charlotte Mecklenburg Library Foundation. Your support will help maintain the excellence of the Library’s collections, diverse programming, and free and open access to technology and information resources. All gifts are tax deductible to the extent allowed by law. The Charlotte Mecklenburg Library Foundation is a non-profit, 501(c)(3) corporation (Tax ID: 46-1172548).

For questions or more information, please call 704-416-0800.

DONOR INFORMATION

<table>
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<tr>
<th>Name (as you would like to appear in donor listings):</th>
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<tr>
<td>Address:</td>
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<td>City: State: Zip:</td>
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<td>Phone Number:</td>
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<td>Email Address:</td>
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GIFT AMOUNT & PURPOSE

Gift of: $__________

☐ My check is enclosed payable to the Charlotte Mecklenburg Library Foundation.
☐ Please charge my credit card (Visa, MasterCard, Discover or American Express).
   Credit Card Number: ___________________________ Exp. Date: __________
   Signature: ___________________________ Security Code: ________
☐ My employer ___________________________ will match this gift. A matching gift form, or an electronic request, has been submitted to my employer.

Optional Information

Please use my gift for the following:
☐ Where the need is greatest
☐ Systemwide programs and technology
☐ New Main Library
☐ Unrestricted endowment
☐ Other ___________________________

This is a special gift:
☐ In honor of: ___________________________
☐ In memory of: ___________________________

Please send an acknowledgement to the honoree or family member listed:

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<td>City: State: Zip:</td>
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OTHER INFORMATION

☐ Please keep my gift anonymous. I understand that I will not be included in donor listings.
☐ I am interested in hearing about options for benefitting the Library in my estate plans.
☐ The Library has been remembered in my will.

Please mail to: Charlotte Mecklenburg Library Foundation, 310 North Tryon Street, Charlotte, NC 28202

Thank you for your support.