

First
Class
Postage
Stamp

FRIENDS OF THE BRIARCLIFF MANOR PUBLIC LIBRARY, INC.

P.O. Box 205

Briarcliff Manor, NY 10510

YES, I want to support the Friends of the Briarcliff Manor Public Library, Inc. Capital Campaign!

Name [Individual(s) or Family] _____

Address _____

City _____ State _____ Zip _____

Telephone _____ E-mail address _____

Enclosed is a check for \$ _____ payable to **Friends of the Briarcliff Manor Public Library, Inc.**

My matching gift form is enclosed will be sent later. Matching organization _____

YES, please add my name to the list of the Campaign Committee-in-Formation

*Your gift is tax deductible to the full extent provided by law.
Appropriate name recognition will be provided for all categories of giving of \$250 and above.*

I/We would like to participate in the selected donor program below.

<input type="checkbox"/> NAMING OPPORTUNITY Opportunity Name _____ Gift Amount \$ _____

<input type="checkbox"/> DEWEY DECIMAL DONOR Dewey Decimal Number _____ Gift Amount <input type="checkbox"/> \$5000 <input type="checkbox"/> \$1000

Naming Opportunity and Dewey Decimal Sections will be assigned on a first-come, first-served basis. If your chosen selection is already spoken for, the Friends will assign a comparable recognition unless you check here.

*Gifts may not be counted toward both the Naming Opportunity Program and the Dewey Decimal Donor Program.
The Friends reserves the right to overlap Dewey Decimal Donor gifts of "hundreds" sections with gifts of "tens" sections.*