

# OSGOOD FAMILY MATCH



Yes, I/we wish to support the North Conway Public Library's Exciting New Chapter.  
I/we have reviewed the Case Statement with this document and pledge to make a gift as outlined below.

I/we therefore pledge the following amount: \$ \_\_\_\_\_

*This gift will be fulfilled as follows:*

- One payment on \_\_\_\_\_
- Over three years (longer terms available upon request)
- Yearly (starting in which month/year) \_\_\_\_\_
- Quarterly
- Other \_\_\_\_\_

*You may direct gifts from your IRA or other estate*

Print Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Please record this gift as follows:

- In honor/memory of \_\_\_\_\_
- To name a particular area\* \_\_\_\_\_  
*\*Requests subject to NCPL Board approval and/or prior reservation.*
- Anonymous. We honor all privacy requests in perpetuity.
- I wish to fund this pledge through a gift other than cash: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Thank you!**

**Please make checks payable to North Conway Public Library  
P.O. Box 409, North Conway, NH 03860**

**For further information, contact Andrea Masters at 603-356-2961  
www.NorthConwayLibrary.com - info@NorthConwayLibrary.com**