



## 2017 Annual Appeal

Yes, I would like to make a donation of:

\$30    \$50    \$75    \$100    \$250    \$500    Other \$ \_\_\_\_\_

Name: \_\_\_\_\_

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

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

My donation is in memory of:

\_\_\_\_\_

Please notify this person about my gift:

name: \_\_\_\_\_

address: \_\_\_\_\_

My Company will match my gift.

(Please include the proper matching gift forms.)

Please make your check payable to Rensselaerville Library and mail it in the enclosed return envelope.

To pay by credit card, please visit [www.rensselaervillelibrary.org/donate.html](http://www.rensselaervillelibrary.org/donate.html)

**Thank You!**