



Enriching
Our
Community

**Please return this completed form and
your check (if applicable) to:**

Chesterfield Township Library
50560 Patricia Ave.
Chesterfield, MI 48051
Phone (586) 598-4900
Fax (586) 598-7900
website: www.chelibrary.org

All gifts are tax deductible to the extent
provided by law. Please consult your tax
professional for more information.

**Chesterfield Township Library
thanks you for your special gift!**

GIVE, EMPOWER, TRANSFORM

Chesterfield Township Library Charitable Donation

Gift Information:

Please accept my gift of:

☐ \$25 ☐ \$50 ☐ \$100 ☐ \$250 ☐ \$500 Other \$ _____

Donations of \$100 or more will be recognized with a plaque on the Library's donor wall.

Please contact me regarding:

☐ Estate plan and will ☐ Gifts of stocks and securities ☐ Annuities

Gift is for:

- ☐ Library's choice – use in the area of greatest need
☐ Library Building Fund
☐ Library materials (physical or digital)
☐ Other (tell us where you would like your gift directed) _____

☐ My employer will match this contribution

Payment options:

☐ My check is enclosed

Please charge my: ☐ Visa ☐ MasterCard ☐ Discover

Name on card: _____

Billing zip code: _____ Card number: _____

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Honor/Memorial gifts:

This gift is:

☐ In Memory of ☐ In Honor of ☐ In celebration of

Name/Occasion: _____

Please send acknowledgement to:

Name: _____

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Donor Information:

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Address: _____

City: _____ State: _____ Zip: _____

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☐ I give the library permission to publicly recognize my gift

☐ I wish to remain anonymous

Signature: _____