



Thank you for your gift intention to **Madison Public Public Library Foundation**. Your contribution will ensure Madison Public Library can fully serve the community for years to come. Please use this form to share details about your gift so we can fully understand your interests and acknowledge your commitment. The foundation acknowledges your future gift may change at any point, and this form does not create a binding obligation.

Name(s) _____

Address _____

City _____ State _____ ZIP _____

Phone _____ Email _____

My/our provision names Madison Public Library Foundation, Inc. as the beneficiary.
Legal Address: 201 W. Mifflin Street, Madison, WI 53703 Tax ID #: 39-1777242

• The approximate value of this future gift is \$ _____.

Source of gift (e.g., will, financial account, life insurance, etc.)

Please explain how you would like your gift to be used.

- I want my gift to benefit Madison Public Library's greatest needs.
- I would like information on restricting my gift for a particular purpose.



All donors like you become part of our Epilogue Circle gift planning community. Please state how you wish your name(s) to be listed in our Epilogue Circle recognition materials.

I want to keep my gift anonymous.

(CONTINUED ON NEXT PAGE)

It is understood that this document is not binding upon the donor(s) or his/her/their estate as to the value of the provision herein described.

Signature of donor _____ Date _____

Signature of donor _____ Date _____

Please return this form to:

Madison Public Library Foundation
Conor Moran, Executive Director
201 W. Mifflin Street
Madison, WI 53703

- Please contact me to discuss my gift intention.

- I do not want to be contacted about my gift intention at this time.