

# Literacy Legacy Program



## PROMINENT SPACE PLEDGE FORM

I/WE want to take the opportunity to create a Literacy Legacy BY NAMING A PROMINENT SPACE in the New Main Library

I wish to place my/our name on the \_\_\_\_\_ Space for \$ \_\_\_\_\_\*

I wish to pay in one lump sum:

Enclosed is a check in the amount of \$ \_\_\_\_\_ (Payable to the Riverside Public Library Foundation)

Full payment of this pledge will be completed within 6 months of the execution of the Donation and Naming Rights Agreement.

I wish to pay in up to 5 consecutive annual installments. Pledge payment periods may be up to 5 consecutive years with the first payment scheduled within 6 months of the execution of the Donation and Naming Rights Agreement. (A Board member will contact you with the Agreement if you mark this box.)

Yes, my employer has a Matching Gift Program. Please contact me for details.

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE ( \_\_\_\_\_ ) \_\_\_\_\_

Email \_\_\_\_\_

The name(s) I/We would like to appear on the space and in printed materials:\*

\_\_\_\_\_  
Please print one character per space, please leave a blank space to indicate breaks between names.

SIGNED \_\_\_\_\_ DATE: \_\_\_\_\_

The Donation and Naming Rights Agreement with RPLF and the City of Riverside will be sent to donors under separate cover.

Please mail this form to:  
**The Riverside Public Library Foundation**  
P. O. Box 349  
Riverside, CA 92502-0349  
Your donation is tax deductible. Tax ID # 33-0780130

For more information, please contact:  
Barbara Shackelton, Chair, Naming Campaign  
951-318-1060 barbara.shackelton@gmail.com

\* The Foundation and the City of Riverside reserve the right to approve the pledge/gift and the naming.