



Billerica Public Library Foundation

15 Concord Road, Billerica MA 01821

I/we enclose a check made payable to the Billerica Public Library Foundation for \$_____.

I/we wish to pledge \$_____ to be paid over ___ years.

The names of all donors will be publicly recognized at a later date.

Please do not include my name on any public recognition.

Donors (up to \$100), Sustaining (\$100-499), Patron (\$500-999), Benefactor (\$1,000+).

Name: _____ Phone: _____
(Please print name as you would like to have it appear.)

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(to donate in memory or in honor of please use the bottom form)



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I/we enclose a check made payable to the Billerica Public Library Foundation for \$_____.

This gift is in memory of or in honor of : _____

Address of honoree: _____

Special message: _____

The names of all honorees will be publicly recognized at a later date.

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Donors (up to \$100), Sustaining (\$100-499), Patron (\$500-999), Benefactor (\$1,000+).

Your Name: _____ Phone: _____

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