



Thank you for your interest in supporting libraries.

Together we can impact lives and communities!

Yes! I would like to make a gift by check today to benefit:

_____ My Library (enter name): _____

_____ Northeast Kansas Library System

Please apply my gift to:

\$.00	Greatest Need
\$.00	Building
\$.00	TOTAL GIFT AMOUNT

About Me:

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ Email: _____

_____ I work for a company with a **Matching Gift program**; please contact me for assistance in completing the match.

_____ I would like to learn more about how a **planned gift** can impact my library; please contact me.

_____ YES! Please share occasional emails with me regarding NEKLS and member library successes.

_____ I wish my gift to be **Anonymous**. (Notification of this gift to the benefiting library will NOT include your name.)

Method of Payment:

Please make **checks** payable to: NEKL Foundation

To make a **credit card gift**, contact the Foundation at 785-838-4090 or online at: <http://foundation.nekls.org>

Please send this form with your check to:

NEKL Foundation
4317 W 6th Street
Lawrence, KS 66049