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MPLF

Murrieta Public Library Foundation, Incorporated

I want to assist the Murrieta Public Library by contributing to the Murrieta Public Library Foundation.

___ Monetary donation of \$ _____
in category _____

___ I pledge \$ _____ payable monthly /
quarterly / yearly for _____ years up to 3 years
(select one). _____

___ Other (describe) _____

**Checks should be drawn to the order of
Murrieta Public Library Foundation, Inc.**

and mailed to

**Eight Town Square
Murrieta, CA 92562**

**Please telephone us at (951) 304-2665, ext. 6632
to discuss other contributions.**

Print Name _____

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Donations are tax-deductible.
Please consult your tax professional.