

1989 SOCIETY GIFT INTENTION FORM

I have made provisions for the Daniel Murphy Scholarship Fund in my:

- Estate Plans _____
- Retirement Plans _____
- Charitable Remainder Trust _____
- Life Insurance Policy _____
- Other _____

DMSF is listed as a: (check one)

Please indicate approximate dollar value or % of estate in which DMSF is named or indication that the Daniel Murphy Scholarship Fund is to receive the residue or remainder of estate (optional):

- primary beneficiary \$ _____
- secondary beneficiary \$ _____
- contingent beneficiary \$ _____

If/when this gift is received by the Daniel Murphy Scholarship Fund it is my wish that DMSF use this gift for the following purpose(s):

- _____
- _____

Comments _____

Name and address of an individual whom the Daniel Murphy Scholarship Fund may contact to provide information about the outcomes of my gift:

- I wish to become a listed member.
- I wish to become an anonymous member and request that my name not be listed publicly. I (do/do not) authorize the Daniel Murphy Scholarship Fund to announce this gift in public documents.

Donor's Signature(s) _____ Print Name(s) _____

Donor's Signature(s) _____ Print Name(s) _____

Address _____

City _____ State _____ Zip _____

Email _____ Date _____