Planned Giving Form

Leave something for future generations with a tax-deductible planned gift. Your generosity will make an important impact for generations to come.

| Donation Information | | | |
|--|--|--|--|
| Amount: \$ | | | |
| Designation: Endowment Fund | | | |
| Additional Information: | | | |
| Personal Donation (name) | | | |
| Corporate Donation (company name) | | | |
| I prefer to make this donation anonymous | | | |
| Comments: | | | |
| Tribute Information: | | | |
| In Honor of | | | |
| In Memory of | | | |
| Billing Information: Title: | | | |
| First Name: | | | |
| Last Name: | | | |
| Address: | | | |

| City: | State: | Zip: | |
|--------------------------|--------------------|-----------------------------|--|
| Home Phone: | | | |
| Email: | | | |
| Please print and en | nclose this form | with your check payable to: | |
| Marshall County I | Historical Society | | |
| 123 N. Michigan S | Street | | |
| Plymouth, IN 465 | | | |
| Receipt for your re | _ | | |
| Marshall County Historic | al Society, Inc. | | |
| 123 N. Michigan Street | | | |
| Plymouth, IN 46563 | | | |
| Date of gift: | | | |
| Amount of gift: | | | |
| Gifted to: General Fund | Research I | Library Endowment Fund | |