

DONOR INFORMATION:

Donor/Gift type: Individual Joint with Spouse

Donor Name: _____

If joint gift, please provide both names. If corporation or entity gift, list name of company.

Preferred E-mail Address: _____

Preferred Phone Number: _____

Preferred Address: _____

City _____ State _____ Zip Code _____

PLANNED GIFT OR DEFERRED GIFT COMMITMENT

The estimated current market value of this gift commitment is valued at \$ _____ (optional)

- *This commitment regarding a planned or deferred gift from the donor to the Historical Society of Central Florida has an estimated current market value indicated above; this value will be utilized for recognition purposes.*
- *The face value of the total gift commitment will be credited toward the comprehensive campaign's gift goal.*

Type of provision: Bequest by will Life insurance proceeds/beneficiary designation
 Other _____

The planned or deferred gift is designated for:

My area of interest: Program/Project Name: _____

Area of greatest need Other: _____

I wish to have a gift agreement drafted in the near future to create instructions for the disposition of funds which will benefit my preferred area of interest at the Historical Society of Central Florida

SPECIAL TERMS AND RECOGNITION: Please note and restrictions for your gift here: _____

For recognition purposes, please list name as: _____

Donor Signature

Date

All gifts to the Historical Society of Central Florida are tax-deductible to the extent allowed by the law.
Please make a check payable to: Historical Society of Central Florida

THANK YOU FOR YOUR GIFT. PLEASE FORWARD COMPLETED FORM TO:

Historical Society of Central Florida, Inc. • Office of Development • 65 East Central Blvd. • Orlando, FL 32801 • 407.836.8559