

McLean County Historical Society DBA: McLean County Museum of History 200 N. Main Street Bloomington, IL 61701 (309) 827-0428

Tax Identification Number: **37-1414038 501(c)(3) nonprofit** organization

STATEMENT OF INTENT FOR AN ESTATE OR DEFERRED GIFT COMMITMENT

As evidence of my/our desire to provide a legacy of support for the McLean County Museum of History (MCMH), I/we hereby inform MCMH that I/we have made provisions for a gift to MCMH in my/our estate plans. I/we understand that this commitment can be modified by me/us at any time.

Name:	Birthdate:
Name:	Birthdate:
Gift Type ☐ Bequest through a will/trust:	
Percentage of estate% (or) Specific amount \$	
□Other (please describe):	
Estimated Gift Value Understanding that the value is subject to change, as of today, I/we es commitment to be approximately \$ I/we understare estate is not legally bound by this statement, and I/we may choose to my/our sole discretion.	nd that, by stating the amount, my/our
Gift Designation ☐ The gift is unrestricted and may be used where the need is greatest	at MCMH.
☐ Please designate the gift for this specific purpose:	
Recognition ☐ I/we accept recognition in the Fell Legacy Society as a result of this my/our name(s) among those of other donors in recognition communi	
$\hfill\square$ I/we do not wish to receive any recognition by MCMH.	
Donor Signature:	_ Date:
Donor Signature:	_ Date:

Norris E. Porter

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