

DELTA SIGMA PI LIVING LEGACY SOCIETY

Verification Form

Donor Information

Donor(s): _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Mobile Home Work
Email: _____ I/We wish to remain anonymous.

Planned Gift Commitment

I have named the Delta Sigma Pi Leadership Foundation in my: (check all that apply)

- Will
 Trust
 Life Insurance Policy: Employer Issued Personal
 Other Planned Gift: _____

I understand that my planned gift must be \$10,000 or more to qualify for recognition as a member of Delta Sigma Pi's Living Legacy Society.

- I have included the appropriate documentation of my above action.
(Optional, but helpful.)

Comments/Notes

Living Legacy Information

The Delta Sigma Pi Leadership Foundation is a 501c3 organization as defined by the IRS. Gifts are tax deductible to the extent provided by law.

The Living Legacy Society is a special group of donors who play an important role in the advancement of Delta Sigma Pi.

Membership is reserved for those who have named the Foundation as a beneficiary of their estate or have directed another planned gift to the Foundation.

Membership in the Living Legacy Society is bestowed on those designating a minimum gift of \$10,000 to the Leadership Foundation through their will, life insurance, or similar method; and providing a signed copy of the Verification Form.

Donor Signature

Signature

Printed Name

Date

Gift Acceptance

(FOR CENTRAL OFFICE USE ONLY)

Date Received

Date Accepted

Executive Vice President Signature

Delta Sigma Pi Leadership Foundation
330 South Campus Avenue
Oxford, Ohio 40506
foundation@dsp.org