

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 45056
foundation@dsp.org**