

**Haddam Historical Society**  
**Legacy Collective**  
Record of Gift Intention

Thank you for completing this confidential Record of Gift Intention. If you have any questions, please contact Executive Director Lisa Malloy at 860-345-2400.

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_ Zip: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Phone: \_\_\_\_\_

**Planned Gift (Bequest) Information**

**The Haddam Historical Society is named as a beneficiary of my will or trust:**

For a specified amount of: \$ \_\_\_\_\_

For \_\_\_\_\_ percent

Estimated current value of intended distribution to Haddam Historical Society: \$ \_\_\_\_\_

**Haddam Historical Society is named as a beneficiary of the following:**

Retirement Plan     Life insurance     Bank, investment or other account

Life-income plan (Trustee's name: \_\_\_\_\_)

**My gift is:**  Restricted     Unrestricted

Please list my name in the Legacy Society

I prefer my gift remain anonymous

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return to Lisa Malloy, Executive Director,  
Haddam Historical Society, P.O. Box 97, Haddam, CT 06438

Note: This form is non-binding; rather it is a method to  
assist the Haddam Historical Society in long range planning.

Thank you