

Date _____

Branch County Community Foundation
2 West Chicago Street, Suite E-1
Coldwater, MI 49036

Dear Board of Directors:

RE: Memorial Fund

I/we have received a copy of the Branch County Community Foundation's policy on memorial funds, and I/we understand and agree with this policy. It is my/our intent to create a memorial fund within the Community Foundation which shall be named the _____.
Name of Fund

I/we understand that this fund will be temporary and will not be invested. I/we further understand that the funds will be held as a temporary fund commencing on _____ and ending on _____. On or before the
Today's Date [90 days from start date]
ending date, I/we will notify the Community Foundation in writing regarding my/our decision to disburse the money in the fund for educational, benevolent, charitable, or public purposes in the community or to create a permanent fund.

I understand that if I fail to notify the Community Foundation of my intentions the Community Foundation board, at its sole discretion, may use the money in the fund to create a permanent unrestricted fund or pool the monies with another fund of the Community Foundation.

Founder's Signature

Date

Founder's Signature

Date

Executive Director's Signature

Date