



**PLEASE EMAIL THIS
GIFT DOCUMENT TO:**

HQ MOWW/CS
c/o Endowment Committee
435 North Lee Street | Alexandria, VA 22314-2301
mowwcs@comcast.net

All documents received will be maintained in the strictest confidence. Please direct questions and requests for additional information, please contact the MOWW Treasurer General (LTC John H. Hollywood, Phone (Res): 301-261-3515, Email: jhhollywood@verizon.net.

A. DESCRIPTION (PLEASE PRINT)

- Date: _____
- Name: _____
- Mailing Address: (NUMBER | STREET | CITY | STATE | ZIP CODE)

- Phone: _____ Email: _____ Fax: _____

B. DONATION (PLEASE PRINT)

Guidance: Please attach other documents, letters, etc., that further describe the nature of the provisions below, in addition to copies of the section(s) of the will, trust agreement or other documents pertaining to this gift.

- I have made/will make a provision for the benefit of the Military order of the World Wars (MOWW): (CIRCLE ONE)
 - An outright bequest in my will. Amount: _____
 - A provision in my will and/or in the will of my surviving spouse. Amount: _____
(PROVIDE HUSBAND'S AND WIFE'S DATE OF BIRTH)
 - Husband's date of birth: _____
 - Wife's date of birth: _____
 - A trust under my will (a testamentary trust) whereby MOWW will be the final beneficiary. Amount: _____
 - A trust under my will (a testamentary trust) whereby MOWW will be the final beneficiary: Amount: _____
(INCLUDE AGE AND GENDER OF ANY LIFE-INCOME BENEFICIARIES OR DESCRIBE OTHER CONDITIONS)
 - Life insurance (with MOWW as a beneficiary): Amount: _____
 - Other: (DESCRIBE)

C. SIGNATURE & DATE (REQUIRED)

INDIVIDUAL DONATING

(Print full name, rank, service (status), and sign)

DATE