

Trustees of Tradition

STATEMENT OF INTENT

I would like to share with you that I/we have named the Milwaukee Public Museum as a beneficiary of my/our estate plans as described below. I/we understand that this information will be held in the strictest of confidence.

I/We have made provisions for the Milwaukee Public Museum in my/our estate planning as follows:

Gi	ift Option				
□ Ве	☐ Bequest through a will or a trust				
Cl	☐ Charitable gift annuity				
Li	ife insurance policy				
☐ IR	☐ IRA/401K/other retirement plan designation				
☐ P.	P.O.D. on bank account or brokerage account				
☐ Cl	☐ Charitable remainder trust				
☐ Cl	☐ Charitable lead trust				
□ O ₁	☐ Other (please describe)				
-	int how you would like your name(s) listed for recognition purposes: (for example, and Mary M. Smith OR Mr. and Mrs. John C. Smith)				
	accept the benefits of membership in the Trustees of Tradition, but prefer to remain ymous.				
Please ret	turn to:				
Milwauke 800 West	M. Smolej-Hill ee Public Museum t Wells Street ee, WI 53233				

		ith, please describe the benefit your documents that reference		kee
•		,		
The following information	will help MPM as	s it plans for the future.		
The approximate gift value	is \$			
Date				
Name(s)				
Address				
City		State	ZIP	
Phone		Email		
Signature				
Signature				

Thank you for joining the *Trustees of Tradition* at the **Milwaukee Public Museum**. Please contact the Planned Giving office at (414) 278-6129 with any inquiries or concerns.