

IRA Charitable Transfer Instructions

Date:		
То:	(Firm that administers my IRA Account)	
Address:		
City/State/Zip		
From:		
Name:		
Address:		
Phone number:	Email:	
Retirement Account under the Tax Increa	ting that you make a direct qualified charitable distribution from my Individual to the University of New Haven as passe Prevention Act of 2015 and section 408(d)(8) of the Internal Revenue Cooniversity of New Haven's tax identification number (EIN) is 06-0761704.	rovided for
payable to the Unive	funds, or issue a check, in the amount of \$ersity of New Haven and mail to address on page 2.	
Please transfer t	the following securities to the University of New Haven (Name and number o	f shares):
	vire transfer securities, please use this link: u/give/ways-to-give/securities.php	
my name and addre	to the University of New Haven, please include both pages of this form, whess as the donor of record, indicates that the transfer is being made from mees the University of the purpose of my gift. Please copy me on your transmir	y IRA
	act me, I can be reached at the following phone number:address:	, or
Thank you for your a	assistance with this transfer.	
Sincerely,		
Printed name:	Signature:	

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Donor Instructions to the University of New Haven

I intend my gift to be	e used for the following purpo	se:		
Unrestricted Annual Fund				
Annual Sc	holarship Fund			
Pledge Payment on my existing pledge for				
	ng a new named fund - we will Phone number:	contact you for details		
Othe	er, please specify:			
Printed donor name:		Signature:		
Date:				
To wire transfer casl	h, please send to:			
Account Name: UNH Gift Account				
Bank Name:	Wells Fargo Bank N.A.			
Bank Address:	205 Church Street			
	New Haven, CT 06510			
Account #	2000039431693			
RTN:	121000248			
Swift ID:	WFBIUS6S			
Chips UID:	0407			
Account Type:	Checking			

So that we may properly credit this gift by wire transfer for the intended purpose, please send a copy of this form to: Darcy Turner, Senior Director of Advancement Services, at daturner@newhaven.edu or the address below.

If sending the donation by mail, please enclose a copy of this form and mail to:

Darcy Turner
Senior Director of Advancement Services
Office of Advancement
University of New Haven
300 Boston Post Road
West Haven, CT 06516
203-479-4730
daturner@newhaven.edu