

Equitable Education Initiative Pledge Form

YES, I/we want to support DMSF with a pledge to support Murphy Scholars!

Name [print name(s) as you would like to be recognized]

Street Address

City

State

Zip Code

Email

Mobile Phone (indicate cell or work)

I/we pledge \$ _____ for _____ years, totaling \$ _____

Form of payment

- Check payable to DMSF is enclosed
- I/we wish to begin payments on (MM/DD/YEAR) _____ / _____ / _____
Subsequent annual payments will be received in (MONTH) _____
- I/we wish to be invoiced 30 days in advance
- I/we wish to donate via a Donor Advised Fund
- Please charge my credit card: Visa MasterCard AMEX Discover

Name on Credit Card

Zip Code

Card Number

Expiration Date

CVV Number

- Stock transfer information: DTC# 0015 Morgan Stanley c/o Bruce Becker
Account Name: Daniel Murphy Scholarship Fund / Tax EIN # 36.3675466
FBO Account # 628.051643.635
For details, contact Alina Gonzalez at 773.206.3866 or alina@dmsf.org.
- My employer matches charitable contributions.
- I/we wish to remain anonymous.
- I/we would like information on DMSF and Estate Planning.

Signature(s)

Date

Please complete and sign form and email to lakesha@dmsf.org or mail to Daniel Murphy Scholarship Fund, 309 W. Washington, Suite 700, Chicago IL 60606, Attention: Lakesha Nelson