

Yes

No

Tax Credit Scholarship Designation Form

If you have any questions or need assistance completing this form and/or making your Tax Credit Scholarship gift, please contact Amy Drozda at adrozda@bigshouldersfund.org (312.751.3850).

First 1	Name:				
Last I	Name:				
E-ma	il Address:				
1.	Please select	t those that apply:			
	Enclo	osed is my check payable	to Big Shoulders Fund.		
	I mai	iled my check of \$	on	(date)	
	I mad	de an online gift of \$	on	(date)	
	I mac	de a wire transfer of \$	on	(date)	
	I mad	de a stock gift on	(date)		
		Company			
		• Number of share	res		
2.	sgo@bigsho	ouldersfund.org or maile	on Authorization Certificated it to Big Shoulders Fur o, please do so to finalize y	nd (212 W. Van Buren	
	Yes	No			
3.	Would you like to be anonymous?				
	Yes	No			
4.	Is your gift	restricted for Big Shoul	ders Fund schools or a sp	pecific school?	



).	If your donation	is restricted	for specific schools please specify which school(s).		
j.	If you are restricting your donation for a specific school, can Big Shoulders Fund provide the school your information?				
	Yes	No			
	I would like to receive the Big Shoulders Fund newsletter:				
	Yes	No			
	Please email	completed for	rms to SGO@bigshouldersfund.org or mail to:		
		,	D' (1 11 E 1		

Big Shoulders Fund 212 W. Van Buren St., Suite 900 Chicago, IL 60607