
Owner/Donor Name

Address

City, State, Zip

To: IRA Administrator

Address

City, State, Zip

RE: Request for Charitable Distribution from Individual Retirement Account Number _____

Dear Sir or Madam:

Please accept this letter as my request to make a direct qualified charitable distribution from my Individual Retirement Account # _____ as provided by the Tax Relief, Unemployment Insurance Reauthorization, and Job Creation Act of 2010.

Please issue a check in the amount of \$ _____ payable to Duke School of Medicine and send the check to Duke School of Medicine at the following address:

Joseph W. Tynan
Director of Gift and Endowment Planning
Duke School of Medicine
512 S. Mangum Street, Suite 400
Durham, NC 27701

In your transmittal to the charity, please indicate my name and address as the donor of record in connection with this transfer, and indicate that the gift is to be used for the following purpose:

Please copy me on your transmittal.

The tax ID number of Duke School of Medicine is 56-0532129.

It is my intention to have this transfer qualify for exclusion during the 2011 tax year. Therefore, it is imperative that this distribution be issued and received by Duke School of Medicine no later than December 31, 2011.

If you have any questions or need to contact me, I can be reached at _____.
Thank you for your assistance in this matter.

Sincerely,

Plan Account Owner

CC: Joseph W. Tynan, J.D.
Director of Gift and Endowment Planning
Duke Medicine
512 S. Mangum Street, Suite 400
Durham, NC 27701
Fax # 919-667-1002