



# Edgewater Historical Society & Museum

5358 N. Ashland Ave. • Chicago, IL 60640

773-506-4849 • www.EdgewaterHistory.org

## Deed of Gift

Date \_\_\_\_\_

Intake Number \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

I, \_\_\_\_\_, own the personal property described below and desire to give said personal property to the Edgewater Historical Society and Museum. I do hereby irrevocably and unconditionally give and transfer to the Edgewater Historical Society and Museum all right, title, and interest, including all copyright, trademark, and related interests, in and to the following described property:

Description of Gift(s)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By my signature below, I accept the foregoing conditions and acknowledge reading any attached information.

Date \_\_\_\_\_

Donor/Agent

Date Received \_\_\_\_\_

Received by

The gift described above is accepted for the Edgewater Historical Society and Museum.

By \_\_\_\_\_  
Name Title Date