MEMORANDUM

To:	IRA Plan Provider:		
	Name		
	Address		
	AddressCity, State, Zip		
From:	Name		
	Address		
	City, State, Zip		
	IRA Account#:		
Re:	Request for Direct Charitable Distrib Individual Retirement Account	oution from	
	accept this memorandum as my request lual Retirement Account.	to make a direct charitable contribution from r	ny
Please	issue a check in the amount of \$	payable to Canisius College (Ta	X
ID nun	nber 16-074-3942) at the following addr	ess:	
Planne	d Giving Office		
Canisi	ıs College		
2001 N	Main Street GM201		
Buffalo	o, NY 14208		
-	transmittal to Canisius College, please in connection with this transfer, and cop	memorialize my name and address as the dono by me on your correspondence.	r of
If you	have any questions or concerns regardin	g this request, I can be reached at	
Thank	you for your prompt attention to and ass	sistance with this matter.	
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Signati	ıre	Date	