



## SPECIAL PURPOSE ENTITY INTENT FORM

### INVESTOR INFORMATION:

_____		_____	
Please Print Name	Spouse's Name		
_____			
Mailing Address			
_____			
Phone Number	Email Address	Today's Date	

### ACCREDITED INVESTOR CRITERIA (must check one):

<input type="checkbox"/>	<b>Income Test:</b> My individual income exceeded \$200,000 in each of the two most recent years or my joint income together with my spouse exceeded \$300,000 in each of those years; <b>and</b> I reasonably expect to earn individual income of at least \$200,000 for this year or joint income with my spouse of at least \$300,000 this year.
<input type="checkbox"/>	<b>Net Worth Test:</b> My individual net worth, or my joint net worth together with my spouse, exceeds \$1,000,000.

### DESIGNATION:

<i>Please apply my contribution as follows (check election)</i>		
<input type="checkbox"/>	Unrestricted, our area of greatest need.	
<input type="checkbox"/>	Restricted to: _____ %	
	Name of School	
	_____ %	
	Name of School	
	_____ %	
	Name of School	
<input type="checkbox"/>	Please allow 10% of my gift to be applied as Unrestricted	

\$ \_\_\_\_\_ **TOTAL CONTRIBUTION AMOUNT PER YEAR** (\$5,000.00 minimum)