



GIFT AGREEMENT
STATE HISTORICAL SOCIETY OF NORTH DAKOTA
SFN 3667 (rev. 9/2011)

SHSND use only

DATE OF GIFT AGREEMENT:

Donor Name

Date of Birth

Mailing Address (city, state , and zip code)

Telephone

Email Address

Description of Object(s)

I, my assignees and heirs, as the Donor of this gift, hereby irrevocably and unconditionally give and transfer to the State Historical Society of North Dakota (hereafter referred to as the SHSND) all right, title, and interest in and to the object(s) described in this document (including all owned copyrights, trademarks, and related interests). I certify that I am the lawful owner of said object(s) and that I have complete authority to make this gift. In the event that the SHSND deems it appropriate to dispose of or transfer the gifted object(s), I hereby direct the SHSND not to return the object(s) to me and may dispose of or transfer the object(s) as it deems appropriate.

Special Conditions

None.

Donor Signature

Date

Name of SHSND Official

Title

Signature

Date