DEED OF GIFT

Cambridge Historical Society 49 School Street, PO Box 16, Jeffersonville, VT 05464

•	Date:	
Address:	State:	Zip:
Phone:	Fax:	r
irrevocably and unconditionally give	d below and desire to give said property to the Hist and transfer to the museum all rights, title, and intend to the following described property.	
Description of Gift:		
By my signature below, I accept the	foregoing conditions and acknowledge reading any	attached information.
This gift is given in memory of:		
Dated:	Donor/agent	
	Donor/agent	
	For CHS use only	
Date received:	Received by:	
Ву:		J.,.
name	title Access	date sion #