



## REQUEST TO MAKE AN IRA DISTRIBUTION

DATE: \_\_\_\_\_

TO (Plan Trustee/Administrator): \_\_\_\_\_

FROM (Account Holder): \_\_\_\_\_

I wish to direct, at this time, a distribution from my Individual Retirement Account (IRA) as allowed by the Protecting Americans from Tax Hikes Act (PATH Act).

Please send \$ \_\_\_\_\_ from my IRA account directly to:

Aldo Leopold Foundation  
Attn: Buddy Huffaker  
E 13701 Levee Road  
Baraboo, WI 53913

Tax Identification Number: 39-1423225

The Foundation is a publicly supported charitable organization qualified to receive such rollover distributions as a 501(c)(3).

If you have any questions or need additional information from the organization please contact Buddy Huffaker at 608.355.0279 x 22, or [buddy@aldoleopold.org](mailto:buddy@aldoleopold.org).

AUTHORIZING SIGNATURE: \_\_\_\_\_

Please send a copy of this form to the address below so that we will be able to identify the origin and appropriately acknowledge this gift.

Aldo Leopold Foundation  
c/o Buddy Huffaker  
E13701 Levee Road  
Baraboo, WI 53913