

Confidential Statement of Intent for membership in

The Legacy Society

This Statement of Intent affirms my present estate plans, is subject to revocation or modification, and is not legally binding on me or my estate. To express a commitment to advancing philanthropy and improving the quality of life in my community, I (we) _____
(Donor) am/are making an estate provision including The Community Foundation of Will County through
(please select appropriate item):

- Outright bequest through a Will A Trust agreement
- Beneficiary designation on life insurance, IRA or other retirement plan
- Other (please specify) _____

The current estimated value of this gift is \$ _____

It is my/our wish that the gift be used:

- At the Foundation's discretion where there is the greatest need.
- For the following Fund or restricted purpose: _____
- To support our Endowment for annual grantmaking or Foundation operations
- I wish to discuss with you further the purpose of my gift.

The Legacy Society was established in 2014 to meaningfully thank and recognize those who have included the Foundation in their estate plans, or have already left a legacy gift. Estate gifts are a unique form of lasting philanthropy that will continue to impact the needs of the community. Recognizing donors during their lifetime for future gifts, allows their example to encourage others, and ensures their wishes are properly documented. We look forward to working with all our Legacy Society members.

Please check the elements of membership in The Legacy Society which best honor your wishes:

- I (we) give permission for our name to be used in listing members of The Legacy Society, which may appear in Foundation materials, with an understanding that the specifics of my (our) arrangements remain confidential. List me (us) as follows: _____
- Although this Intent makes me (us) part of The Legacy Society, please list us only as "Anonymous" until after our death, or forever.
- I (we) are willing to have our name, arrangements, and likeness used for promotion purposes with our consent and approval.

Name _____

Address _____

City _____ State _____ Zip _____

Preferred Phone _____ Home Cell Work

E-mail _____

Donor Signature

Date

Donor Signature

*We understand estate plans can change over time, and if possible, request that you notify us of future changes to your Intent.