



LETTER OF INTENT FOR A FUTURE (ESTATE) GIFT

As evidence of my/our desire to provide a legacy of support to Delaware County, I/we hereby inform The Foundation for Delaware County (“Foundation”) that I/we have made a provision for a gift to the Foundation in my/our estate plan. I/we understand that this commitment is revocable and can be modified by me/us at any time.

Name Second Name (if joint gift)

Address City State Zip

Phone () Email

It is my/our intent to leave a legacy to the Foundation through my/our:

- Will
 Retirement Plan Assets
 Life Insurance Policy
 Living Trust*
 Charitable Remainder Trust*
 Other _____

I/we wish to inform the Foundation for long-term planning purposes only, that as of this date, the estimated value of my/our gift is: \$ _____.** (If your gift is a percentage of your estate, please indicate the estimated present value of that percentage.) I/we understand that, by stating an amount, my/our estate is not legally bound by this statement and I may choose to add, subtract, or revoke this bequest at any time, at my/our sole discretion. The Foundation kindly requests notification any time you make changes or adjustments to your gift.

This gift will create the following fund type(s) and/ or add to the existing following fund type(s) as further defined by my/our estate plans:

- Delaware County Benefit Fund
 Pre-existing Fund _____
 Designated Fund to Support Specific Nonprofit(s)

Name of Organization(s) _____

- Field of Interest Fund(s):
 Animal Advocacy
 Food, Agriculture, & Nutrition
 Refugee
 Arts , Cult ure, & Humanities
 Housing
 Senior Living
 Education
 Hist oric Pre ser vation
 Social Enterprise
 Environment
 Human Relations
 Other _____

- Scholarship Fund:
 Describe who the fund should support _____

Please choose one of the following:

Feel free to publish my/our name(s) on your donor list as a motivation for others to leave a future gift to benefit Delaware County. I/we wish my/our names(s) to appear as:

Do not publish my/our names. This is an anonymous gift to be shared only in the event of my/our death.

Additional Instructions:

If changed circumstances should at some future time make it impossible or impractical to carry out exactly the above purpose in the above manner, then The Foundation for Delaware County Board of Directors may change the purpose and manner as near as is practical to the original intent.

Donor(s) Signature(s)

Date

** If your CRT beneficiary designation is irrevocable, please enclose a copy of the trust.*

*** We hope that you will share the approximate amount of your gift with us so that the program will know of your generosity and be able to recognize you appropriately. It is also helpful for us to have on file any supporting documentation which you may be able to share with us. Please attach if possible.*