

Restricted Legacy Gift Intent Form

Thank you for your decision to support our organization through a legacy gift. This form is used to express your intent and to ensure your future gift is directed according to your specific wishes. Please print this form, complete the fields, and sign it.

Donor Information

Full Name:

Joint Donor Name (if applicable):

Street Address:

City, State, Zip Code:

Phone Number:

Email Address:

Gift Provision Details

Please describe the type of legacy gift you have provisioned (for example: Will, Living Trust, Retirement Account Beneficiary, Life Insurance Policy, etc.):

Provision/Gift Type:

Please indicate the estimated value or percentage of the future gift (for example: \$10,000, or 10% of estate):

Estimated Value or Percentage:

Restriction Instructions

Specify the restricted purpose, program, department, or endowment fund where you wish this gift to be directed:

Specific Designation/Restriction:

Acknowledgment and Signatures

This statement of intent is non-binding on your estate and is used for planning purposes only.

Donor Signature (Sign after printing):

Date:

Joint Donor Signature (Sign after printing):

Date: