

Planned Gift Confirmation Form

Indian River Community Foundation expresses its appreciation for your commitment to support our community's future with a planned gift. Please take a moment to complete this confidential form and return it to us as a confirmation of your intentions:

i/we commit the following planned gi	iff to indian River Community Foundation:
_ ' _	aritable Remainder Trust bled Income Fund
☐ Retirement Account ☐ Annuity	☐ Life Insurance ☐ Investment Account ☐ Other:
☐ Fund Name	Community Foundation Unrestricted :
2011 and recognizes donors who use Incestate plans. Members of the Society ha	ma Lee Loy Legacy Society, which was established in dian River Community Foundation to carry out their ve planned gifts today to provide benefits to our below how you would like your name to appear for main anonymous.
I/We grant you permission to publish (Please print your name as you would li	h my/our name(s) as follows: (ke it to appear in our recognition materials.)
Name	Name of spouse (if applicable)
Address	City, State Zip
Phone 1 Phone 2	? Email
Date of birth (dd/mm/yyyy)	Spouse date of birth (dd/mm/yyyy)
Signature	Spouse's signature