Letter of Intent for a Future Gift

As evidence of desire to provide a legacy of support to the Sharon S. Richardson Community Hospice, I hereby inform the above named organization that a provision has been made for a gift in my estate plans. I understand that this commitment is revocable and can be modified by me at any time.

Name(s)

_____

Address City State Zip

_____

Phone Fax E-mail

_____

It is my intent to leave a gift to the Sharon S. Richardson Community Hospice through my:

□ Will □ Retirement Plan Assets □ Life Insurance Policy

□ Living Trust □ Charitable Remainder Trust □ Charitable Gift Annuity

□ Charitable Lead Trust □ Gift of Real Estate □ Other

I wish to inform the Sharon S. Richardson Community Hospice for long-term planning purposes only, my plan is to allocate a legacy gift of _____% of my estate valued at approximately $_____. I understand that my estate is not legally bound by this statement and I may choose to add, subtract, or revoke this intention at any time, at my sole discretion. It is my desire that this gift be used in the following manner:

□ Patient Care Fund

□ Endowment

□ Debt Reduction

Members of the Legacy Circle of Sharon S. Richardson Community Hospice help to sustain the service focused mission of the organization through planned giving. Please enroll me in the Legacy Circle of the Sharon S. Richardson Community Hospice under the following conditions:

Feel free to publish my name among your list of Legacy Circle members as motivation for others to leave a gift to benefit the Sharon S. Richardson Community Hospice. My name(s) should be listed as:

(Please print) _____

□ I would like this to be an anonymous gift. Please do not list my name.

_____	_____
Date	Donor Signature
_____	_____
Date	Donor Signature

Please contact the Development Director if you make changes or adjustments to your plans, or want to modify the above listing.

We are very appreciative of your consideration of a legacy gift.

Sincerely,

Joe Richardson II
Board Chair