



Intent for a Planned Gift

As evidence of my/our desire to provide a legacy of support to Mercy Foundation North, I/we hereby inform you that I/we have made a provision for a gift in my/our estate plans.

I/we understand that this commitment can be changed or modified by me/us at any time.

It is my/our intent to leave a legacy gift to Mercy Foundation North through my/our:

- | | | |
|---------------------------------------|---|--|
| <input type="checkbox"/> Will | <input type="checkbox"/> IRA or Retirement Plans Assets | <input type="checkbox"/> Life Insurance Policy |
| <input type="checkbox"/> Living Trust | <input type="checkbox"/> Charitable Trust | <input type="checkbox"/> Other Asset <i>(please explain below)</i> |

It is my/our intent to restrict my/our legacy gift to benefit the following area(s) at Mercy Foundation North. Gifts with no restriction allow the organization to apply the gift toward the area of greatest need.

Designation: _____

For the benefit of Mercy Foundation North's long-term legacy gift planning purposes, the estimated value of my/our gift as of this date is \$ _____ (optional).

Donor Name: _____ Spouse Name: _____

Mailing Address: _____

City/State/Zip: _____

Primary Phone(s): _____

Email Address: _____

Please do *not* list my/our names publicly.

OR

I/we agree to have my/our name(s) shared publicly, understanding that news of my/our planned gift may help motivate others to make a future gift to benefit the Mercy Foundation North. I/we understand this permission is to share my/our name(s) only; **amounts will not be disclosed.** Please list/our name(s) as follows:

Display name(s) as: _____

Donor Signature: _____ Date: _____

Spouse Signature: _____ Date: _____

Please mail this completed form and any accompanying documentation to:

Mercy Foundation North • 2625 Edith Avenue, Suite E, Redding, CA 96001
(530) 247-3424 (office) • (530) 247-3418 (fax) • Federal Tax ID: 94- 3136799