BEQUEST INTENTION FORM

LANCASTER COUNTY COMMUNITY FOUNDATION

Adamstown Area Library
educate • engage • empower

Thank you for thinking of our organization in your legacy plans. It's an honor to be part of your life's story.

This information recorded below is not legally binding and can be changed at any time. Having a record of your planned gift simply allows us to include you in our legacy society and to better plan for the future as we honor your intent.

DONOR INFORMATION *Please include both names if giving jointly*

Name | Date of Birth

Name | Date of Birth

Address

City | State | ZIP

Email | Phone Number

GIFT INFORMATION

I/we have made a provision for Adamstown Area Library through my/our:

- ◯ Will
- ◯ Living Trust
- ◯ Retirement plan beneficiary designation
- ◯ Life insurance policy
- ◯ Charitable Gift Annuity
- ◯ Charitable Remainder Trust

This gift is a:

- ◯ Specific dollar amount $
- ◯ Residual of my/our estate $
- ◯ Percentage of my/our estate %
- ◯ Percentage of retirement %

Unless otherwise specified, your gift will go towards our permanent organizational endowment, held at the Lancaster County Community Foundation.

If you would like your gift to be for immediate use or for a portion of it to be endowed, please indicate here:

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ACKNOWLEDGEMENT

I/we give permission to list my/our name(s) in donor recognition materials.

- ◯ YES, please list our names as:
- ◯ NO

Additional notes:

I/we understand that this form is not legally binding and that I/we may modify or revoke this intention at any time.

Signature

Date