## **Confidential Bequest Intention Form**

Thank you for your generous bequest commitment to Iowa Legal Aid. Your legacy gift will help us plan for the future as we make <u>Hope</u>, <u>Dignity and Justice</u> a reality for all Iowans.



Please fill out this form so we can understand your intentions for your gift. The information you provide is not legally binding, and we understand that you may wish to change your gift in the future. For gifts that will take effect after your lifetime, Iowa Legal Aid should be named as:

Iowa Legal Aid	
1111 9th Street, Suite 230	
Des Moines, IA 50314	
Tax ID: 42-1079227	
Name(s):	
Year(s) of Birth:	
Address:	
Phone:	Email:
You will receive occasional email updates from	n Iowa Legal Aid. We will not sell, rent, or exchange your email address.

## **About Your Gift**

If you are willing to disclose more information about your gift, please check all that apply and provide a conservative estimate of the value of each gift in today's dollars.

	Will: \$
	Insurance Policy: \$
	Revocable Living Trust: \$
	Real estate: \$
	Charitable Remainder Trust: \$
	Retirement Plan/IRA: \$
	Other asset(s): \$
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You can indicate that your gift be used for Iowa Legal Aid's area of greatest need or for a specific project or program. Would you like your gift to be used for a specific purpose?

Yes

🗖 No

If you checked yes, please tell us how to direct your gift:

Additional Information		
Is yo	ur gift contingent? 🔲 Yes 🔲 No If yes, please explain	
A con	tingent gift comes to Iowa Legal Aid only if the other named beneficiaries do not survive you.	
Hov	w would you like to be recognized for your gift?	
	I/We would like to be listed as (a) Legacy Club member(s) which may include listing my/our gift within a dollar range. Please list my/our name(s) as:	
	I/We prefer that my/our gift not be listed within a dollar range, but you may list my/our name(s) as (a) Legacy Club member(s). Please list my/our name(s) as:	
	I/We wish to remain anonymous for this gift.	
Signature(s)		
Date	:: Date:	
Please attach a copy of the document naming Iowa Legal Aid as a beneficiary.		
Pleas	stions? Contact us at 515-400-3596 or <u>foundation@iowalaw.org</u> . se return this form and attachment(s) to Iowa Legal Aid – 1111 9 <sup>th</sup> Street, Suite 230, Des nes, IA 50314 or by email at <u>foundation@iowalaw.org</u> .	