

JOHNSON COUNTY LIBRARY FOUNDATION

Deferred Gift Commitment Form STATEMENT OF CHARITABLE INTENT

I/We are pleased to confirm that an estate plan provision has been made for a planned gift to the Johnson County Library Foundation as part of the 1952 Society campaign. I anticipate that my/our planned gift would be made as follows:

Gift Category:

- Bequest (will/trust)
 Beneficiary Designation (retirement account/insurance)
 Other (please describe): _____

Gift Details and Nature of Estate Provision (*contingencies, percentage of estate, description of gift property, specific amount, residue*): _____

My best estimate of the current value of this gift is \$ _____

I/We want this gift to be used for ____ area of greatest need or ____ the designated purpose as follows: _____

(Please note: if the designated use does not exist or is not feasible at the time the gift is realized, I/We authorize Johnson County Library Foundation to make use of this gift for alternative purposes.)

For recognition purposes:

- My/Our names should be listed as follows: _____
 I/We wish to remain anonymous.

Please provide a copy of the relevant pages of your documentation that directs your estate gift or beneficiary designation to the Johnson County Library Foundation, including each document's first page, and signature pages.

This form is for Johnson County Library Foundation's records only. I/We understand it is not legally binding upon my/our estate as to the ultimate receipt or value of this gift.

_____ Donor Name	_____ Birthdate
_____ Signature	_____ Date
_____ Donor Name	_____ Birthdate
_____ Signature	_____ Date

JOHNSON COUNTY LIBRARY **FOUNDATION**

Deferred Gift Commitment Form

Contact Information Addendum

Donor(s)

Name _____ Name _____

Address _____ City _____ State _____ Zip _____

Address _____ City _____ State _____ Zip _____

E-mail _____ E-Mail _____ Phone _____

Family Contact (Optional)

Name _____ Relation _____

Address _____ City _____ State _____ Zip _____

E-Mail _____ Phone _____

Financial Advisor (Optional)

Name _____ Company _____

Address _____ City _____ State _____ Zip _____

E-Mail _____ Phone _____

Legal Advisor (Optional)

Name _____ Company _____

Address _____ City _____ State _____ Zip _____

E-Mail _____ Phone _____

(Please note: The Johnson County Library Foundation uses contact information for donors, family contact, financial advisor, and legal advisor solely for purposes of administering the donor's(s') deferred gift commitment and not for solicitation or other purposes.)