

LEGACY OF LIGHT COMMITMENT FORM



Legacy of Light Society celebrates the generosity and commitment of those who have remembered PorchLight in estate plans or will.

If you have made a commitment or plan to, please fill out the following information so that we can honor your gift.

NAME	<input type="text"/>	PHONE	<input type="text"/>
ADDRESS	<input type="text"/>		
CITY	<input type="text"/>	STATE	<input type="text"/>
E-MAIL	<input type="text"/>	ZIP	<input type="text"/>

TYPE OF PLANNED GIFT

<input type="checkbox"/> Retirement Plan (IRA, 401K)	<input type="checkbox"/> Gift Appreciated Assets (Stocks, Real Estate)
<input type="checkbox"/> Life Insurance	<input type="checkbox"/> Charitable Gift Annuities/Remainder Trusts

I/we anticipate our future gift will have an approximate value of \$

Are there any additional details you wish to share?

What is the desired purpose of your planned gift to PorchLight?

<input type="checkbox"/>	This gift is unrestricted and should be used where needed most.
<input type="checkbox"/>	I have a specific purpose and will discuss with PorchLight.

**This form is non-binding and does not constitute a legal promise of any future donation. We understand your estate plans may change.*

CONFIDENTIALITY / PUBLICATION

All information below will be kept confidential and used to track potential planned giving to PorchLight, unless otherwise indicated.

<input type="checkbox"/>	Yes, I/we would like to be listed in publications to inspire others to give.
<input type="checkbox"/>	I/we wish to remain anonymous.

NEXT STEP

PLEASE RETURN THIS COMPLETED FORM BY EMAIL TO:
DEVELOPMENT@PORCHLIGHT CARES
OR, MAIL TO ADDRESS BELOW TO ATTENTION: KERRI O'FARRELL