

Legal Aid Society of Palm Beach Legacy Circle



DECLARATION OF INTENT

Donor Information:

Name(s): _____

Address: _____

Phone: _____ Email: _____

Please list my name in Legacy Circle publications (gift details are not listed).

I/we wish to be listed as: _____

Please consider me/us to be anonymous members; **do not** list us in Legacy Circle publications.

Gift

I/ We have named Legal Aid Society of Palm Beach County (LASPBC) in my/our estate plan as follows:

Information:

Will/Living Trust for (a specified amount). (a percentage). *Estimated Value:* _____

Retirement Fund for (a specified amount). (a percentage). *Estimated Value:* _____

Donor Advised Fund *Estimated Value:* _____

Life Insurance Policy *Estimated Value:* _____

Other: *Please describe & include Estimated Value:* _____

My/Our gift is: Unrestricted Designated specifically for: _____

Estimated total value of gift: _____, as of _____ (date)

Providing the information above about your bequest or estate gift to LASPBC enables LASPBC to plan and administer your gifts in accordance with your wishes. If you wish LASPBC to receive a copy of the relevant section(s) of your estate plan, please include it with this document. Your information will be kept strictly confidential.

Signature:

I/We understand that I may modify or revoke this form at any time and that it is not a legal obligation binding me or my estate. I understand that LASPBC cannot act as an executor of a donor's estate.

Signature: _____ Date: _____

Spouse's Signature (if joint): _____ Date: _____



Please return this form to:
Philanthropy Office, LASPBC
423 Fern Street, 2nd Floor
West Palm Beach, FL 33401



Or by email to:
dbrookes@legalaidpbc.org

