** Toledo Rotary Club Foundation**

Legacy League Reply Form

**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City, State, Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PLEASE COMPLETE AS APPLICABLE:**

I/we have made provisions for a future gift to a Fund at the Toledo Rotary Club Foundation through a(n):

\_\_\_\_\_ Bequest through a will or trust

\_\_\_\_\_ Charitable Remainder Trust

\_\_\_\_\_ Charitable Lead Trust

\_\_\_\_\_ Life Insurance Policy

\_\_\_\_\_ IRA/401(k)/403(b) designation

Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you wish, please advise us of the approximate value of your estate gift: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide photocopies of the appropriate sections of your will or trust documents, beneficiary forms or other documents which, reference your legacy gift to the Toledo Rotary Club Foundation.

\_\_\_\_\_\_\_\_YES, I/we wish to be listed as Legacy Society donors as follows (e.g. John Doe, Mary

 Doe, John and Mary Doe or Mr. & Mrs. John Doe):

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_I/we wish to remain anonymous and do not wish to have my/our names listed as

Legacy Society donors

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

THANK YOU! **Please return to: Kathy Tate, Executive Director**

 **Rotary Club of Toledo**

 **101 N. Summit, Suite 436**

 **Toledo, Ohio 43604**