



Letter of Intent for a Future (Estate) Gift

As evidence of my/our desire to provide a legacy of support for the Epilepsy Foundation of Minnesota, I/we hereby inform you that I/we have made a provision for the Epilepsy Foundation of Minnesota in my/our estate plans. I/we understand that this commitment is revocable and can be modified by me/us at any time.

Name(s)

Address City State Zip

(____) _____ (____) _____ _____
Phone Fax E-mail

It is my/our intent to leave a legacy for the benefit of the Epilepsy Foundation of Minnesota through my/our:

Will Trust Retirement Plan Assets Life Insurance Other _____

I/we wish to inform the Epilepsy Foundation of Minnesota, for long-term planning purposes, that as of this date, the value of my/our gift is: \$_____. * (If your gift is a percentage of your estate, please indicate the approximate present value of that percentage.) I/we understand that, by stating an amount, my/our estate is not legally bound by this statement and I may choose to add to, subtract from, or revoke this bequest at any time, at my/our sole discretion.

I/We would like this gift to benefit the following program, or where the need is greatest:

_____ Publish my/our name(s) on your annual donor list as a motivation for others to leave a future gift to benefit the Epilepsy Foundation of Minnesota. Please list my/our name as follows: _____

_____ Please list my/our name(s) internally to the Development Office only (no outside publication).

_____ _____
Date Signature and birth date

_____ _____
Date Signature and birth date

* We hope that you will share the approximate amount of your gift with us so the foundation will know of your generosity recognize you appropriately. Please attach any supporting documentation which you may be able to share with us.