



P.O. Box 1267 • Hendersonville, NC 28793 • Phone: 828.697.5551 • info@hcefnc.org

**Letter of Intent for Estate Gift**

I/we desire to provide for the future well-being of Henderson County Education Foundation (HCEF) and the Henderson County Public Schools through a provision in my/our estate plans, and with this letter, I/we are informing HCEF of my/our plans. I/we understand that this future commitment can be revoked or modified by me/us at any time.

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**I/we have made a provision to leave a legacy to HCEF through my/our:**

Will  Retirement plan or IRA  Living Trust  Life Insurance Policy

Other: \_\_\_\_\_

Additional Details

\_\_\_\_\_

I/we wish to inform HCEF for long-term planning purposes only, that the current value of my/our future gift is \$\_\_\_\_\_. (Please note that this information is optional. You do not have to provide this information.) I/we understand that by stating an amount, my/our estate is not legally bound by this statement and I/we may choose to add, subtract or revoke this bequest at any time, at my/our sole discretion.

**Gift Recognition (choose one)**

You may publish my/our names in HCEF legacy gift recognition lists as motivation to others to leave future gifts to benefit HCEF.

I/we do not want my/our name(s) published.

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

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