## LETTER OF INTENT FOR A PLANNED GIFT.

## **United Way of Northeastern MN**



New Intention Updated Intent	ion			
NAME (S)				
ADDRESS	CITY	STATE	ZIP	
PHONE	EMAIL			
PREFERENCES				
/We wish to provide a planned gift of support to plans. It is my/our intention to leave a planned gi		esota (UWNEMN)	in my/our estate	
Will or Trust	Charitable	Charitable Remainder Trust		
Charitable Lead Trust	Donor Ad	Donor Advised Fund Reminder		
Life Insurance Policy	Other Ass	set(s) (please des	cribe):	
Retirement Plan/Beneficiary Designation (401(k), 403(b), IRA, Keogh, Brokerage Acc	ount)			
/We would like to inform UWNEMN, for long-term my/our gift is \$ or or egally bound by this statement and at any time l/this planned gift.*	% of my/our estate. I/We u	nderstand that m	y/our estate is not	
GIFT PURPOSE				
Unrestricted Unrestricted Ende	owment An unrestricted gift allows yo	ur donation to go wh	ere it is needed most.	
Other (Please indicate below - briefly desc programs or agencies, please provide per		d like your gift to	benefit. If multiple	
<b>RECOGNITION</b> Donors who include UWNEMN in their estate plar	ns will be enrolled in HWNFMN's Le	egacy Society		
Please list my/our name(s) as follows:		fer no public reco	gnition.	
SIGNATURE		DATE		
SIGNATURE		DATE		











## YOUR GIFT MATTERS

## Your words matter.

There are other community members like you that care about improving the lives of children, families, and individuals across Northeastern Minnesota; would you help us inspire them?

When you share your reasons for giving, your words may help someone envision the joy of planned giving and decide to make a transformational gift of their own.

hope that my gift:	I made a transformational gift to united way of NE MN decause:				
hope that my gift:					
	I hope that my gift:				



United Way of Northeastern MN











