

PLANNED GIFT INTENTION FORM

I/We have included Early Music in Columbus in my/our estate plans in recognition of my/our commitment to **Leave a Legacy**.

Name:		Email:	
Name:		Email:	
Address:			
Phone:			
	onor acknowled	umbus permission to publish my/our name(s gements. I/We understand that this will serve o give.	•
I/We wish to	be recognized	as follows:	_
□ NO, I wish I	my gift to rema	in anonymous.	
Type of Planned Gi	ft:		
□ Will		 Life Insurance Policy Beneficiary 	′
□ Retirement Plan I	Beneficiary	Other:	
□ Estimated Value:	\$	(this is optional, but helps our future planr	ning)
□ I/we have a donor a similar entity.	r-advised fund e	established through The Columbus Foundation	n or
Attorney/Financial	Advisor informa	ation (optional)	
Advisor/Firm Name	e:		
Address:			
City:	State:	Zip code:	
Dhone.	Fn	nail:	

Purpose of the Planned Gift:

□ Ron and Janice Cook Fund for Early Music

Housed at the Columbus Foundation, this is the general endowment fund for Early Music in Columbus

□Unrestricted

Please use the proceeds in support of those areas with the greatest nee	ed
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Restricted to a specific	purpose
(please identify)	

I/We understand that I/we am/are NOT making a legal or binding commitment by submitting this acknowledgement. Furthermore, Early Music in Columbus should understand that the size of my/our future gift may be significantly different from the amount estimated above for the purposes of valuation.

Signed:	
Print Name:	
Signed:	
Print Name:	
Date:	

In order to properly include Early Music in Columbus in your plans, please use our legal name and federal tax ID#. Please instruct your financial and legal advisors.

Legal Name: Friends of Early Music, Inc.

Federal Tax ID #: 31-1242710

Please complete and return this form to

Early Music in Columbus % Conservatory of Music at Capital University 1 College and Main Columbus, OH 43209

For questions, please contact Jodi Marmion, Development Manager, at 614-973-1961 or via email at <u>jodi@earlymusicincolumbus.org</u>.