

FUTURE OF HOPE LEGACY SOCIETY

Confidential Statement of Planned Gift Intention

The Future of Hope Legacy Society was established to recognize donors who have made arrangements to give a gift through their estate plans. The commitment to support the life and mission of the IHM community beyond their lifetimes demonstrates that "love never ends." *1 Corinthians 13:8* The Society accomplishes a twofold purpose: to thank and recognize benefactors who have made a legacy gift to the congregation and to encourage others to consider making a planned gift to the Sisters, Servants of the Immaculate Heart of Mary.

PERSONAL INFORMATION

Name(s)						
Please p	Please print name(s) as you would like to be recognized.					
Address						
City	State Zip Code					
Home Phone:	Cell Phone:					
Email Address:						

□ Please enroll me/us in the Future of Hope Legacy Society. You have permission to use my/our name(s) in IHM publications and on the donor wall.

□ Please enroll me/us in the Future of Hope Legacy Society. I/We wish to remain anonymous.

DATE OF BIRTH(S)

Please include your date(s) of birth. This information allows the Development team to share in your celebration.

Name	Month / Day / Year	Name	Month / Day / Year		
ESTATE PLANNING	INFORMATION				
I/We have provided estate plan:	a gift for the sisters, as set forth in m	ny/our will, irrev	ocable trust, retirement plan or other		
Bequest/Will	🔲 IRA/Retirement Plan Benefi	ciary	Life Insurance Beneficiary		
□ Trust	Other (please specify)				
The estimated gift va	alue is				
My/Our planned gift	t is designated to:	□ Minis	ry 🛛 Area of Greatest Need		
(We encourage you t	o share a copy of your estate plan doci	ument. Your info	rmation will remain confidential.)		
Signature	Date	Signature	Date		
CONTACT INFORMA	TION				
If you have any ques	stions, please contact Marilyn S. Mea	dows, Director	of Development, at 734-240-9861.		
Please return compl	eted form to: Marilyn S. Meadows, D IHM Sisters 610 West Elm Avenue Monroe, MI 48162	Director of Deve	opment		