



## BEQUEST INTENTION FORM

I (We) desire to inform you that I (we) have included a bequest to Community Services League of Jackson County in my (our) estate plan. I (We) estimate that the current value of the gift to Community Services League of Jackson County is approximately \$\_\_\_\_\_.

It is my (our) pleasure to make this gift to Community Services League of Jackson County of \_\_\_\_\_ [cash, life insurance, IRA or retirement plan assets, investments or other gift] for the benefit of \_\_\_\_\_ (state particular purpose, if any).

I (We) understand that this gift is revocable and can be changed at any time. I further understand that I (We and/or My Estate) am not legally or morally obligated to fulfill this intention if I choose to modify or cancel my gift at a future date.

I (We) will inform you if I (we) change my intent toward your organization or if the value of my (our) gift significantly increases or decreases.

All planned giving donors qualify for inclusion and recognition as Bess Wallace Truman Legacy Society members. This is our way of thanking and recognizing you for your contributions to our work.

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Thank you for your generosity in supporting our mission!

Please return this form to:

**Community Services League  
Attn: Development Office  
404 North Noland Road  
Independence, MO 64050**