

## **Ohio Lions Eye Research**

## Foundation (501c3)

## **Planned Giving Declaration Form**

| Thank you for your intention to include Ohi<br>Please complete this form with as much det   | •         | Research (OLERF) (501c3) in your estate plan.<br>e comfortable sharing. Please print clearly.   |
|---|-----------|---|
| New Intention Updated   | Intention |   |
| Name:   | Spouse    | name (joint gift):  |
| Lions club name (optional):   |           |   |
| Address:  |           |   |
| City:   |           | State: ZIP:   |
| Phone:  | _ Email:  |   |
| I hereby acknowledge my intention  To create a gift through:  Bequest (will)  401(k), IRA, or other retirement plan  Life insurance or commercial annuity  Beneficiary of savings, checking, money market, stock, or other account  Trust  Other: |           | I would like my gift to benefit:  General Eye Research  Diabetes Eye Research  Macular Degeneration Research  Please contact me to discuss my options.  Note: A specific designation is not guaranteed. |
| The gift is expected to be \$   |           | <u>.</u>  |
| Amount used for recognition purposes  |           |   |
| Select one:   |           |   |
| I permit OLERF to list my/our name(s) a   | as        | in Foundation   |
| Donor and marketing materials. I/we I wish to remain anonymous.  This form indicates my current plans; I under  |           |   |
| Donor signature   | Date      |   |
| Please return this form to:   |           |   |
| OLERF, 4074 Hoover Road, Grove City, OH   | 43123     |   |
| OLERF signature (For OLERF Purposes Only)   | Date      |   |