



WAUKESHA COUNTY

Community
FOUNDATION

For the purpose of planning only, I/we indicate that I/we have named Waukesha County Community Foundation as a beneficiary of the planned gift described below:

TYPE OF ARRANGEMENT

- Gift from Will or Living Trust Gift from Retirement Plan Gift from Gift Annuity
 Gift from Charitable Trust Gift from Life Insurance Other: _____

GIFT DESIGNATION

- Greatest Need _____% Animals and the Environment Fund _____%
 Community Grants Fund _____% Affordable Housing Fund _____%
 Operations Fund _____% Education Fund _____%
 Basic Human Needs Fund _____% Creative Arts and Culture Fund _____%
 Health and Wellness Interest Fund _____% Specific Fund Designation: _____%
 Children, Youth, and Seniors Fund _____% _____%

SPECIFICS OF THE ARRANGEMENT

(with as much detail as you are comfortable sharing)

- Specific current value: \$ _____ or Approximate current value: \$ _____
 Other details (such as % of estate): _____

PERSONAL INFORMATION

Name(s) and Date(s) of Birth _____

Mailing Address Home Business _____

City _____ State _____ Zip _____

Phone _____ Email Address _____

Signature(s) _____ Date _____

Preferred Name(s) for recognition for Legacy Society Members on webpage, or:

- I/We wish to remain anonymous.
 I/We wish to remain anonymous during my/our lifetimes but may be named when the estate gift is received.

Gifts to the Community Foundation are tax deductible as allowed by law.

Please return this form to Waukesha County Community Foundation, 2727 North Grandview Blvd, Suite 301, Waukesha, WI 53188. Please contact Melissa Baxter at mbaxter@waukeshafoundation.org or call our office at 262-513-1861. Thank you!