United Way of the Columbia-Willamette



YOUR LEGACY AT UNITED WAY

Individual Planned Gift Notification Form

Thank you for your support of the United Way of the Columbia-Willamette (UWCW). We are honored to be a part of your legacy.

Your partnership sustains our mission to improve lives, strengthen communities and advance equity by mobilizing the caring power of people across our region. By informing us of your intention to include UWCW in your estate plans, you enable us to acknowledge your generous commitment, while also empowering us to make bold, strategic plans for the future of our community.

Please tell us about y	ourself			
Name				
Address		City	State	ZIP
Email		Birthdate (monti	h/date only if preferred)
Home Phone		Cell Phone		
We would be very gra	teful to hear about why y	ou support UWCW an	d how it's meaning	gful to you.
	ow you would like your us to ensure that your v	_		
☐I would like UWCW	to apply my contribution	to the area of most n	eed or opportunity	%
	ict my gift to the United to come and contribute s	•		nent Fund, to be %
□I am making this gi	ft $\ \square$ In honor of $\ \square$ In m	nemory of		
planning for the futur It is my intent to leave	reciate some basic inforce. Please provide as must a legacy for United Way	ch information as you y of the Columbia-Willa	are comfortable s amette through my	sharing. /:
□Will □Trust □	Retirement Account	Life Insurance Policy	□Other	
Estimated value of yo	our legacy gift			
☐ Specific Amount_				
☐ Percentage of es	tate	% Estimated to be	\$	

Is UWCW a \Box Primary or \Box Contingent beneficiary?

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Legacy Circle recognition

We consider all supporters who include a gift of any amount to UWCW in their estate plans to be honored members of our Legacy Circle. If you choose to grant permission to be listed as a Legacy Circle member in UWCW collateral, your commitment can inspire others to consider their own legacies. We hope you will allow us to recognize and celebrate your generous gift.

☐ I authorize including my name in UWCW's publication for others to leave a future gift to ben list as:	ations in the list of Legacy Circle members as a efit United Way of the Columbia-Willamette. Please
Please clearly print or type as it should appear	
$\hfill \square$ I prefer to remain anonymous, while enjoying the	other benefits of Legacy Circle membership.
Additional information It's especially helpful to have a copy of the portion o pertains to your gift to United Way of the Columbia-V intended gift and fulfill your wishes.	, ,
$\hfill\Box$ Please check this box if you are attaching docum	entation for our files.
Signature	 Date

At UWCW, we recognize that values of deferred gifts as well as the provisions themselves may change over time. Your signature verifies only that the above information is accurate as of this date and does not represent a binding legal commitment to UWCW. Please inform us should you update your gift plans to ensure it is administered in the way you intend.

Return to

Michelle House, Director of Gift Processing United Way of the Columbia-Willamette 619 SW 11th Avenue Portland, OR 97205 donations@unitedway-pdx.org | 503.228.9383

United Way of the Columbia-Willamette Tax ID#: 93-0582124