

CONFIDENTIAL LETTER OF INTENT

All information provided below will be treated strictly confidentially, will be used for Grand Traverse Regional Land Conservancy's internal purposes only (except for name listing along with other Vanguard Society members, if applicable) and is not considered to be a legal or financial obligation.

Grand Traverse Regional Land Conservancy recognizes all those making long-term provisions for it or any of its programs as members of its *Vanguard Society*.

Please complete:

Name(s): _____

Street: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

My/our name/s may be published as a member(s) of the *Vanguard Society*

Print Name(s) as preferred for *Vanguard Society* listing (if different from above):

I/we prefer to remain anonymous

Signature: _____ Date: _____

Signature: _____ Date: _____

As an indication of my/our support for Grand Traverse Regional Land Conservancy or one of its programs, I/we am/are pleased to confirm that I/we have made a provision as follows (select all that apply):

- Bequest in my/our Will
- Provision in my/our Revocable Living Trust
- Establishment of a Charitable Remainder Trust
- Establishment of a Charitable Gift Annuity naming GTRLC as a beneficiary
- Beneficiary Designation in my/our Qualified Retirement Plan or Commercial Annuity
- Life Insurance Gift

I/we conservatively estimate the current value of my/our provision to be approximately \$_____. The Grand Traverse Regional Land Conservancy recognizes that values are subject to change and dependent upon unforeseen circumstances. This information will be used only to help Grand Traverse Regional Land Conservancy project possible future financial support. This Letter of Intent *is not considered to be a legally binding obligation or promise of any future donation to GTRLC and GTRLC recognizes such provision may be subject to revocation or modification at any time.*

I/we would like my/our provision to be allocated as follows:

Area of greatest need

Conservative value for "Area of greatest need" \$_____

Stewardship Endowment

Conservative value for "Stewardship Endowment" \$_____

I/we worked with the following advisor to establish the gift:

Name: _____ Profession: _____

Firm Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Is there anything else that you would like us to know about your estate plan? _____

Thank you for your generous support!

Please return this completed form via mail to:

Marissa Duque
Director of Development
Grand Traverse Regional Land Conservancy
3860 N. Long Lake Rd, Ste D
Traverse City, MI 49684

or, scan and email to: mduque@gtrlc.org

or, transmit via FAX: 231-929-0433