

**Thank you for your commitment to creating a legacy at Providence Inland Northwest Foundation!**

Name \_\_\_\_\_ Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Spouse/Partner \_\_\_\_\_ Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone Number \_\_\_\_\_ Email \_\_\_\_\_

**As an expression of my/our commitment to the future needs of Providence, I am/we are naming Providence Inland Northwest Foundation (PINF) as a beneficiary of my/our:**

- Will/Living Trust \$ \_\_\_\_\_ OR % \_\_\_\_\_ of estimated estate value \$ \_\_\_\_\_  
 Name of Attorney, Personal Representative or Trustee \_\_\_\_\_
- Retirement Plan/IRA \$ \_\_\_\_\_ OR % \_\_\_\_\_ of current total asset value \$ \_\_\_\_\_
- Life Insurance Policy \$ \_\_\_\_\_ OR % \_\_\_\_\_ of current total asset value \$ \_\_\_\_\_
- Savings Account \$ \_\_\_\_\_ OR % \_\_\_\_\_ of current asset value \$ \_\_\_\_\_
- Other Asset \_\_\_\_\_

(Providing approximate value of donation is optional; Legacy gift amounts are not published)

**Sample Language for Will or Living Trust**

“I bequeath (percentage/dollar amount) to Providence Inland Northwest Foundation, 101 W. Eighth Avenue, Spokane, WA 99204, tax ID # 32-0014330, for the purpose of (general support or specify).”

**My Charitable Impact - Specific Ministry/Program**

\*Primary Designation \_\_\_\_\_  
 Secondary Designation \_\_\_\_\_

- I/we have enclosed a copy of document(s) detailing the gift(s) described above

*\* In the event the primary designation is dissolved or no longer funded by Providence Inland Northwest Foundation’s philanthropic efforts, any remaining funds will be reallocated to the secondary designation.*

**My Legacy Story**

PINF is proud to celebrate legacy commitments through special recognition in our Legacy Society

- Please do not publish my name
- I/We want to inspire others to give. Include my name on Legacy Society donor lists (amount not published)

Please indicate on the line above how you would like your name(s) to appear for recognition & publication purposes

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Gift Officer’s Printed Name & Signature \_\_\_\_\_

**As the donor(s), I am/We are making this commitment in good faith, but may elect to change it at any time and future unforeseen circumstances could alter the ultimate legacy gift.**