

Statement of Future Gifts

Name(s):	Date(s) of Birth:	
Phone:	Email:	
My Gift is for:	Gift Type:	You Will Receive My Gift:
VALCV Education Fund VALCV Fund	 Will or Trust Provision Retirement or Investment Account Beneficiary Provision Life Insurance Beneficiary Provision Other: 	surviving partner
My Gift is Written As:		
A specific dollar amount: A percentage of my estate/ If based on a percent pleas	account percent e estimate the current value of the gift to VALCV	′ \$
Attached is:		
A copy of my provision des instrument.Check type of account:Retirement Account	ovision pertaining to my bequest to VALCV ignating VCU as beneficiary of a percentage of a Investment Account Life Insurance Policy f VALCV as successor-in-interest of a percentage	Other:
Prefer not to share the documentMy gift is joint with my spouse.	ument with that provision at this time se/partner. Please include us both as legacy socase do not publish my name but do invite me to	
Sign and Date:		
Print Name:	Spouse/Partner Name:	
Signature:	Signature:	
Date:	Date:	

Your gift entitles you to membership in a Legacy Society to recognize those who

have made estate or planned gifts for the Virginia League of Conservation Voters. Legacy Society members are invited to special events and programs and their names may appear in electronic or print publications.

VALCV recognizes that this gift is subject to change depending on personal and economic circumstances. This form is not intended to be a legally binding pledge, and any information provided will remain confidential.