SEWARD COMMUNITY FOUNDATION
ALASKA COMMUNITY FOUNDATION AFFILIATE

Legacy Society Declaration of Intent

The Legacy Society is a special group of individuals making a lasting commitment to the future well-being of Alaska through bequests, wills, and other planned gifts.

DONOR INFORMATION

Name: _____

Address: _____

City, State, Zip: _____

Phone Number: _____

Email Address: _____

Please select one by initialing a box below:

☐ I give Seward Community Foundation and the Alaska Community Foundation permission to include my name on the list of Legacy Society Donors and would like to be listed as _____.
(If left blank, your name will be listed per the "name" field above.)

☐ I prefer to remain anonymous – not listed as a member of the Legacy Society

☐ I prefer to remain anonymous and unknown to Seward Community Foundation. I understand that I will not be listed as a member of the Legacy Society.*
**If you wish to remain anonymous and unknown, please send your completed form directly to the Vice President of Development & Communications at the Alaska Community Foundation by email or mail and marked CONFIDENTIAL.*
Email: legacy@alaskacf.org, Address: 3201 C Street, Suite 110, Anchorage, AK 99503

GIFT INFORMATION

It is my intention to help provide for the future of Alaska with a gift to Seward Community Foundation through: *(please check any that apply)*

☐ My will ☐ My trust agreement ☐ My retirement fund ☐ Other _____

In the amount of $_____ or _____% *(indication of amount or percentage is optional)*

I wish my gift to benefit: *(please check one)*

☐ _____, an endowment to support Seward Community Foundation

☐ Other: _____

☐ Please contact me

SIGNATURE

Though this declaration of intent is an expression of my current plans, I understand that I may modify or revoke it at any time and that it is not a legal obligation binding me or my estate. I understand that the Alaska Community Foundation cannot act as executor of a donor's estate.

_____ _____

Signature *Date*