

1920 LEGACY SOCIETY MEMBERSHIP PROFILE

The 1920 Legacy Society celebrates donor who have made their estates plans known to the League of Women Voters Education Fund Development Staff.

Name: _____

Mailing Address: _____

Telephone: _____ Email: _____

Type of Provision

I have made a provision for LWVEF in my estate plan as follows: ESTIMATED AMOUNT
(amounts are voluntary and need not be listed).

- | | |
|---|----------|
| 1. Outright bequest in Will: | |
| (a) Specific Dollar Amount | \$ _____ |
| (b) Specific Property (please describe) _____ | \$ _____ |
| _____ | |
| (c) Share of entire residue of estate (_____ %) | \$ _____ |
| 2. Conditional bequest of Will (please describe conditions) _____ | \$ _____ |
| _____ | |
| 3. Trust under Will or to be funded by Will (please describe) | |
| (a) Charitable Remainder Trust _____ | \$ _____ |
| (b) Charitable Lead Trust _____ | \$ _____ |
| (c) Other _____ | \$ _____ |
| 4. As beneficiary of a life insurance policy | \$ _____ |
| 5. Other (please describe) | \$ _____ |
| 6. (Optional) Approximate value of gift | \$ _____ |

If your gift to the League is for other than Education Fund, please describe any restrictions on the back of this form. Attachments or letters that further describe the above provision(s) are encouraged. In particular, a copy of the section of your Will, Trust Agreement, or other document containing the provisions(s) will be appreciated. In the event of unforeseen circumstances that require any further change in the above estate planning(s), I agree to notify the League of Women Voters of such change.

_____ _____
Date Signature

_____ _____ _____
Estate Attorney Executor Next of Kin

Note: Please retain a copy of this document with your Will.

Please return this form to: League of Women Voters Education Fund
Attention: Development
1730 M Street NW, Suite 1000
Washington, D.C. 20036
202-263-1352
TAX ID: 53-0239013