

Declaration of Support



I am pleased to report that the Quincy Public Schools Foundation has been named in my estate plans.

Name: _____

Type of Gift:

- A beneficiary in a will or living trust. Circle one: specific / residual / contingent
- A beneficiary in a Charitable Remainder Trust or Charitable Lead Trust.
 % Payout Rate: _____
- A beneficiary of a Retirement Plan.
- Permanent Life Insurance. Circle one: Universal / Variable / Whole
 - QPSF is owner and beneficiary.
 - QPSF is beneficiary only.
- Term Life Insurance
- Other Gift: _____

Estimated Value to the Quincy Public Schools Foundation: _____

Date of birth: _____ Gender: _____

Gift to be used by the Quincy Public Schools Foundation:

- To meet area of greatest need.
- To be determined by the Board of Trustees.
- To benefit a particular school: _____
- To benefit a particular program: _____
- To benefit a particular age group: _____

In regard to listing my name as a member of the **Legacy Society** donor recognition program:

- My name should appear as: _____
- Please do not list my name. The commitment should appear "Anonymous."

I trust this information will be held in the strictest confidence and utilized only for estimating the value of future gifts for use in general planning activities. It is understood this Declaration of Support is not legally binding and that the future gift to the Quincy Public Schools Foundation may be changed without notice.

| | | |
|------------|------------------|---------|
| _____ | _____ | _____ |
| Signature | Date | Address |
| _____ | _____ | _____ |
| Print Name | City, State, Zip | Phone |