Name:		_ Date of E	sirtn:	(optional)	
Spouse's Name:		Date of Birth:		(optional)	
Preferred Phone #:	Email:				
This Intention of Future Philanthropy is estate plans. I understand that this is a The Lakeland Foundation is confidention in the Lakeland Foundation is confidention in the Lakeland Foundation in the Lakeland F	a nonbinding declar al. Realizing that ci	ation of intent cumstances m	and that a	any information shared with	,
I/we have made a charitable contribut	tion to The Lakeland	d Foundation in	our estat	e plan through:	
Bequest in a Will or Trust (\$5,000	D and above), as foll	ows:			
Specific amount: \$	Percentage	of estate:	%	Remainder of estate:	9
Charitable Gift Annuity (\$10,000	and above)				
Retirement Plan					
Life Insurance					
Charitable Trust (describe):					
Other (describe):					
The approximate amount of my/our b	equest, based on to	oday's value, is	\$		
We would like our gift to be used:					
for Lakeland's priority (area of gr	eatest need), or				
for the following purpose:					
I/we would like to be recognized publi	icly as a member of	the Legacy Soc	iety. Plea	se list my/our name(s) as foll	ows:
I/we prefer <i>name(s)</i> to remain an	nonymous. I/\	ve prefer <i>gift</i> to	remain a	nonymous.	
Signature:			_ Date:		
Spouse's Signature (if applicable):					
Attorney's/Adviser's Name (optional): _			Adv	viser's Phone:	
For questions or further assistance, please c	contact executive direc	ctor Greg Sanders	s at 440.52	5.7086/gsanders3@lakelandcc.ed	du.

Please return this form to The Lakeland Foundation, Lakeland Community College, 7700 Clocktower Drive, Kirtland, OH 44094.