Confidential Letter of Intent

Thank you for informing us of your intention to include Turning Points Network

in your estate plan. We are pleased to welcome you to The Coffin-Mozden Legacy Society.

All information provided below will be treated confidentially, will be used for Turning Points Network’s internal purposes only, and is not considered to be a legal or financial obligation. The nature/size of your gift will be kept confidential.

Please indicate your preferences below:

Date Name(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_Zip \_\_\_\_\_\_\_\_\_

Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

🞏 I/we are willing to be listed as a Coffin-Mozden Legacy Society member

🞏 I/we prefer to remain anonymous for this gift

**As an indication of my support of Turning Points Network, I am pleased to confirm that I have made a provision as follows:**

*Please check all that apply:*

 Bequest provision in my/our Will or Living Trust

o Bequest is a specific amount

o Bequest is stated as a percentage or percentage of the residuum

o Bequest depends upon a contingency

Contingency provision:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Establishment of a Charitable Remainder Trust

 Beneficiary Designation (e.g. qualified retirement plan, commercial annuity, or another vehicle.)

 Life Insurance Gift

 Real Estate

 Gift of Stock

 Other

Additional Information: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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***Thank you for supporting a future free from violence. Please return this form to:***

**Turning Points Network**

**c/o Development Director**

**11 School Street**

**Claremont, NH 03743**