



Arkansas Jewish Community LETTER OF INTENT



LEAVE A LEGACY
CONGREGATION B'NAI ISRAEL

In the tradition of our Jewish faith, I wish to share my blessings by declaring my intent to provide for the needs of future generations.

It is with deep satisfaction that:

- I/We notify you that I/we have already made a legacy provision in my/our estate plan
- I/We shall make a provision during the next months

I wish to support the following institutions: (check all that apply)

- | | |
|-------------------------------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> Congregation Agudath Achim (Little Rock) | <input type="checkbox"/> Congregation House of Israel (Hot Springs) |
| <input type="checkbox"/> Congregation B'nai Israel (Little Rock) | <input type="checkbox"/> Jewish Federation of Arkansas |
| <input type="checkbox"/> Congregation Etz Chaim (Bentonville) | <input type="checkbox"/> Temple Shalom (Fayetteville) |

With a legacy gift established through a:

- | | |
|-------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| <input type="checkbox"/> Bequest in my will or trust | <input type="checkbox"/> Life Insurance Policy |
| <input type="checkbox"/> Remainder of IRA or other retirement plan | <input type="checkbox"/> Charitable Remainder Trust |
| <input type="checkbox"/> Gift of real estate, securities or other property | <input type="checkbox"/> Donor-Advised Fund |
| <input type="checkbox"/> Charitable Gift Annuity | <input type="checkbox"/> Other <input type="text"/> |
| <input type="checkbox"/> I wish to establish an endowment now with a current gift of cash or property | |

Amount of Gift – Please choose one of the following two options:

- The approximate value of my/our commitment will be \$ or % of .
- I/We prefer to keep the details of this commitment confidential.

Privacy Statement: To encourage others to make commitments

- I/We permit my name to be listed in printed materials
- I/We prefer to remain anonymous. *(My name should appear as)*

Name(s):

Address:

City/State/Zip:

Phone: **Email:** **Birthdate:**

I understand that this letter of intent is not a legal obligation and may be changed at my discretion at any time.

Signed

Date

Signed

Date