



## Legacy Intention Form

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

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

### Intention

- I/We have named Naples Children and Education Foundation, Inc. (NCEF) as a full or partial beneficiary in my/our will, retirement plan or life insurance policy.
- I/We have established a Foundation, Trust or Donor Advised Fund to benefit NCEF upon my/our death.

### Recognition

- NCEF may list my/our name(s) as member(s) of the Legacy Society
- I/We prefer anonymity

### Gift Designation

My/Our eventual planned gift, once received, should be designated as follows (check all that apply):

- General Endowment; and/or
- Separate Named Fund (Please Specify): \_\_\_\_\_  
**NCEF's policy allows donors contributing \$250,000+ to create a Separate Named Fund and to specify how the distribution may be used including: General Operations and/or one of the Service Category Funds (Child Advocacy Endowed Fund, Early Learning Endowed Fund, Medical/Healthcare Endowed Fund, or Out-of-School Time Endowed Fund). A 1.5% administrative fee applies to all Endowment and Separate Named Funds.**

I/We understand this document is not legally binding and I/we may revoke my/our decision to include (NCEF) in my/our estate plans. NCEF may not disclose any details regarding my/our gift to anyone or any third-party organization without my/our prior written consent.

DONOR(S): \_\_\_\_\_  
 \_\_\_\_\_  
 (Donor(s) (date)

NCEF  
 By: \_\_\_\_\_  
 Maria Jimenez-Lara, CEO (date)

\_\_\_\_\_  
 (Donor(s) (date)

By: \_\_\_\_\_  
 Joan Larson, CFO (date)

By: \_\_\_\_\_  
 Max Guinn, Treasurer (date)

**Please return to:**  
 Naples Children & Education Foundation  
 2590 Goodlette-Frank Road North  
 Naples, FL 34103