Invitation to join Little Flower Children and Family Services of New York’s ‘Legacy of Hope’ Giving Society

Little Flower Children and Family Services of New York (Little Flower) supports the most vulnerable members of our society, helping them to flourish and thrive. Our team of over 500 essential workers does so by operating according to a shared set of principles and by honoring our rich history and the legacies of those who have come before us. We consistently seek to identify opportunities for collaboration and mutually beneficial partnerships, both inside and outside our organization and are committed to stewarding our resources responsibly. We work hard to leverage our assets in order to fulfill our mission in a way that is financially sustainable and ensures our ability to continually meet the needs of our community.

Today, we invite you to join us in these efforts by committing to a legacy gift that will support future Agency, client and community needs.

INSTRUCTIONS: To become a member of the ‘Legacy of Hope’ Giving Society simply complete and return this form (no donation is required at this time). Your membership in the Society will be completed with this signed and returned form and there is no minimum requirement for a planned gift. You may also revisit the details of this Letter of Intent at a later date.

LETTER OF INTENT

I/we would like to be listed as a member(s) of Little Flower’s ‘Legacy of Hope Society’ by committing (Initial here) to a planned gift (as identified below).

Select One:

☐ I/we intend to include Little Flower in my/our estate plans by the following date:______________

☐ I/we have already made provisions for the following planned/deferred gift(s) to Little Flower in the form of a:

☐ Bequest in a Last Will & Testament
☐ Life Insurance Policy
☐ Proceeds for the sale of Real Estate
☐ Charitable Gift Annuity
☐ Charitable Lead Trust
☐ Retirement Plan/IRA
☐ Charitable Remainder Trust
☐ Other:_________________________________________________________________

The amount of my/our planned gift is estimated at $______________ OR is equal to _____% of the gift form identified above.

I am using ____________________________ to manage my estate planning/planned gifts. Phone:______________

(Name of Law Firm/Fiscal Company Contact)

Please print and complete all lines above and below before returning by mail.

By signing this Letter of Intent, I/we reaffirm my/our commitment to Little Flower. I/we understand that this commitment is revocable and can be modified by me/us at any time. I/we make a commitment to inform Little Flower, in writing, when/if changes are made.

Full Name:________________________________________________________  Date of Birth: _____/_____/______

Spouse’s Full Name (if applicable):______________________________________  Date of Birth: _____/_____/______

Street Address:_____________________________________________________________________________________

City/State/ZipCode:_________________________________________________________________________________

Phone: (__________) ________ - ____________  Email:____________________________________________________

Signature:_________________________________________________________________ Date: _____/_____/______

Spouse’s Signature (if applicable):_______________________________________________ Date: _____/_____/______