

LETTER OF INTENT FOR PLANNED GIVING



I/We hereby inform you that a legacy gift to Children's Cancer Research Fund is included in my/our estate plans. I/We understand that this commitment is non-binding and that I/we retain the right to change or revoke this gift at any time.

NAME \_\_\_\_\_ DOB \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_ EMAIL \_\_\_\_\_

Please do not publish my/our name(s). We prefer to keep this commitment private.

I/WE HAVE PROVIDED THIS GIFT THROUGH MY/OUR:  Will  IRA/Retirement Plan  
 Charitable Remainder Trust  Trust  Life Insurance  Other: \_\_\_\_\_

USE OF FUNDS:  Restricted  Unrestricted

I/We wish to inform Children's Cancer Research Fund for long-term planning purposes, that as of this date, the value of my/our gift is: \$ \_\_\_\_\_\*. I/We understand that, by stating an amount, my/our estate is not legally bound by this statement and I/we can alter or revoke this gift at any time. Note: If your gift is a percentage of your estate, please indicate the approximate present value of that percentage. This information will remain confidential. \*We understand that the value of your gift may change depending on circumstances.

\_\_\_\_\_  
DONOR SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

\_\_\_\_\_  
DONOR SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

\_\_\_\_\_  
CHILDREN'S CANCER RESEARCH FUND REPRESENTATIVE \_\_\_\_\_ DATE \_\_\_\_\_

**RETURN TO:**  
Children's Cancer Research Fund  
Attn: John Hallberg  
7301 Ohms Lane, Suite 355  
Minneapolis, MN 55439

Children's Cancer Research Fund supports the brightest scientists whose ideas make the greatest impact for children with cancer. We work closely with researchers to fund innovative new projects quickly and ensure that their promising discoveries continue uninterrupted.