



If you have made provisions for a gift to the Community Foundation through your estate plan, please complete this form and return to:

York County Community Foundation
14 West Market Street
York, PA 17401

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Telephone \_\_\_\_\_ Email \_\_\_\_\_

I/we have made the following provision for a gift:

- Bequest, Retirement Plan, Life Insurance Policy, Charitable Gift Annuity, Charitable Remainder Trust, Other

In recognizing this gift, the Community Foundation is authorized to list the following names as members of the 1749 Society:

\_\_\_\_\_

That such charitable benefit be used to establish or add to the following named fund:

\_\_\_\_\_

Annual distributions from the Fund, as determined in accordance with the distribution policies of the Foundation, shall be granted to or for the support as outlined below:

\_\_\_\_\_% to Fund for York County of York County Community Foundation
\_\_\_\_\_% to \_\_\_\_\_ Field of Interest Fund of YCCF
\_\_\_\_\_% to \_\_\_\_\_ (nonprofit organization)
\_\_\_\_\_% to \_\_\_\_\_ (nonprofit organization)
\_\_\_\_\_% to \_\_\_\_\_ (nonprofit organization)
\_\_\_\_\_% to \_\_\_\_\_ (nonprofit organization)

By: \_\_\_\_\_
Donor Date

By: \_\_\_\_\_
Donor Date

Accepted: York County Community Foundation

By: \_\_\_\_\_
Jane M. Conover, President Date

