

## **Letter of Intent**

With this Letter of Intent, I am expressing my desire to ensure that the enjoyment and enrichment that I have experienced at Allied Solutions Center for the Performing Arts is available to the community for generations to come. I wish to become a member of the Legacy Society at Allied Solutions Center for the Performing Arts and understand this Letter of Intent is not legally binding and may be modified or revoked.

I/We have already made provisions for Allied Solution	ons Center for the Performing Arts in my/our will(s).
☐ I/We intend to make provisions for Allied Solutions	Center for the Performing Arts in my/our will(s).
Gift Type:	
☐ Bequest through Will or Trust	☐ Charitable Gift Annuity
☐ Beneficiary designation of retirement plan assets	☐ Stocks/Bonds
☐ Beneficiary designation of Donor-Advised Fund	☐ Gift of real estate, securities, or other property
☐ Charitable Remainder Trust	☐ Other
☐ Gift of Life Insurance	
Gift Information	
lacksquare The estimated current dollar value of my/our gift is:	: \$
☐ I/We wish to give the sum of% of any r	residuary estate.
Gift Designation	
☐ Please designate my/our gift where needed.	
Please designate my/our gift for the following:	
Donor Name(s):	
Address:	
	State: Zip:
Preferred Phone:	cell / home (please circle)
Email:	
Gift Recognition	
	to Allied Solutions Center for the Performing Arts to recognize ge, website, etc. (No specific gift information will be shared publicly.)
☐ I would like to remain anonymous.	
☐ I would like my/our naming attribution to appear as	::
Signature	Signature
Date:	Date:
Please return this completed form to: Allied Solution	ns Center for the Performing Arts, Attn: Kathy Pataluch

Allied Solutions Center for the Performing Arts is an Indiana 501(c)(3) nonprofit corporation exempt from federal and state income taxes. Our federal tax ID # is 20-3901164. IRS Determination letter available upon request. Please keep a copy of this document for your records.

1 Carter Green, Carmel, IN 46032