

Warren Society Letter of Intent

Yes, I am interested in improving the health of our communities. I wish to show my support by accepting your invitation to become a member of the General Joseph Warren Society. By accepting this invitation, I agree to commit a minimum of \$10,000 to Commonwealth Health Foundation.

It is my understanding that by signing this form, I am merely expressing my intent to provide financial support and that this Letter of Intent shall not be considered legally binding upon my estate. I assure you however, that I shall do my very best to fulfill my intention of this gift.

I understand that gifts made to the Commonwealth Health Foundation are deductible to the full amount allowable under the Internal Revenue Service regulations.

Here is how I intend to make my Warren Society pledge balance payable:

\$ _____ during 2010	\$ _____ during 2014
\$ _____ during 2011	\$ _____ during 2015
\$ _____ during 2012	\$ _____ during 2016
\$ _____ during 2013	\$ _____ during 2017

Total \$ _____

I would like to receive reminders about this gift as indicated below:

Annually Semi-Annually Quarterly

Payment of \$ _____ is enclosed.

Signature of Donor

Date

Recognition Name: _____
(Please print your name as you want it to appear in donor listings)

Please recognize my/our gift as Anonymous.

Mailing Address: _____

Home Phone: _____ Business Phone: _____

E-mail address: _____

*Please make check payable to Commonwealth Health Foundation and return the completed form to
Commonwealth Health Foundation
800 Park Street
Bowling Green, KY 42101*