



# CHARITABLE BEQUEST INTENT

Thank you for your intention to fulfill your charitable legacy in partnership with INFORMS. Please use this form to indicate your plans for our records.

This document does not bind you or your estate. By signing this form, you are acknowledging your current plans to benefit INFORMS in the future and giving us guidance as to your wishes. INFORMS recognizes that gift plans may change over time, and we hope you will consider notifying us of any relevant changes in your plans.

We very much appreciate your expression of support for INFORMS and our mission.

## DONOR INFORMATION

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## GIFT INFORMATION

### Please describe the nature of your gift

(Please attach a copy of the documentation of your gift. All such information will be kept confidential.)

- Will or Living Trust
- Beneficiary Designation
- Endowed Fund
- Other: \_\_\_\_\_

### Please select which fund or endowment you would like your gift to support:

- INFORMS Scholarship Fund
- Pro Bono Analytics Fund
- General Fund
- Other: \_\_\_\_\_
- Student Fund

## RECOGNITION

Thank you for your pledge. In recognition of your intention, we would like to acknowledge you by publicizing your name on our donor list and including you in any future recognition activities.

- Yes, you may publicize my/our name(s) on the donor list, which serves as a motivation for others to consider planned gifts in support of INFORMS. Please list name(s) as: \_\_\_\_\_
- I prefer my intentions to remain anonymous.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### For more information please contact:

Mary Magrogan, Director of Recognition and Development  
mary.magrogan@informs.org | 443-757-3530 | 5521 Research Park Drive, Catonsville, MD 21228