

# Confirmation Form

**Legacy Gift Intention** 

Thank you for considering a Legacy Gift to Mission Services of London Foundation. Your generosity and care will go a long way to help the vulnerable in London and area – men, women and children in need. Please complete the form below and return it to us via fax or mail.

First Name			Last Name			
Addre	ess (including Apt. #)					
City		Province		Postal Code		
Home	Phone	Business Phone		Email Address		
О Му	I have already included Mission Services of London Foundation in my Will  It is my intention to include Mission Services of London Foundation in my Will  My bequest will be in the form of  A specific dollar amount: \$					
<u> </u>	Life insurance, RRSPs or RRIFs  □ I have made Mission Services of London Foundation a beneficiary of my RRSP or RRIF portfolio in the amount of \$ or percentage of% (Optional) □ I have named Mission Services of London Foundation as the owner and beneficiary of a life insurance policy □ I have named Mission Services of London Foundation as a beneficiary of a life insurance policy in the amount of \$ or percentage of% (Optional)					
	A Trust with Mission S	ovide details):		<u> </u>		

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ıld like my Legacy Gift to support				
Highest priority needs at any branch	of Mission Services of London			
Highest priority needs of Mission Ser	vices of London Foundation			
Highest priority needs at The Men's N	Mission & Rehabilitation Centre			
☐ Highest priority needs at Rotholme Women's & Family Shelter				
Highest priority needs at Quintin War	ner House (addictions rehabilitation)			
Highest priority needs at Community	Mental Health Programs			
Highest priority needs at The Mission	n Store			
Other (please speak to a member of	the Foundation staff to discuss your wishes):			
• • • • • • • • • • • • • • • • • • • •	nition and prefer my gift to remain anonymous. his Legacy Gift and ask that all listings show the			
I would prefer my gift to remain anonymous during my lifetime, but I give permission for it to be recognized once you have received my gift. Please use the following as the recognition name:				
ature	Date			
•	Highest priority needs at any branch Highest priority needs of Mission Ser Highest priority needs at The Men's I Highest priority needs at Rotholme W Highest priority needs at Quintin War Highest priority needs at Community Highest priority needs at The Mission Other (please speak to a member of  gnition No, I would not like any type of recog Yes, I give permission to recognize the following as the recognition name:  I would prefer my gift to remain anon to be recognized once you have recognition name:			

#### Please return this completed form to:

Mission Services of London 4-797 York Street London, ON N5W 6A8 Tel.: 519-433-2807 | Fax: 519-434-1956 legacy@missionservices.ca

#### **NOTES**

#### Value of Donated Securities

Your gift of publicly traded securities will be valued, for tax receipting purposes, at the close-of-day market value on the day the securities are received in Mission Services of London Foundation's brokerage account. Donated securities are sold as soon as possible after they are received. The donation amount that your estate will be able to claim on your final tax return will be the value shown on the donation tax receipt.

#### Privacy

Mission Services of London respects your privacy. Personal information you provide will be updated in our files and used to provide you with information about events, activities, programs, services and fundraising initiatives. If you have any questions about our privacy policies, please contact our Head Office at 519-433-2807.

Charitable Registration Number 866777899 RR0001