ONE CITY SCHOOLS

Tell Us About Your Legacy Cift

Statement of Intent

Thank you for your generous commitment to One City Schools Foundation, Inc (OCS). To better understand your intentions for this gift, we ask that you please complete this form with as much detail as you are comfortable sharing. The information you provide is not legally binding and we understand that you may wish to change your gift in the future. Questions? Please call OCS at (608) 531-2128.

Your Cont	act Informatio	n				
Name(s)						
Address						
City			State	Zip		
Phone		Н	C W	Email		
	*You will receiv	*You will receive occasional email updates from OCS. We will not sell, rent or exchange your email address				
•	villing to disclos	e information abo value of your gift,			hat apply. If you choose to	
Will	Trust	IRA or Retirem	nent Plan Assets	Charital	ole Remainder	
Life Insu	rance Policy	Charitable Gif	Annuity	Other		
<u> </u>	-	ities of OCS (Unre		rograms % Supr	port Preschool	
	% Support for OCS Operations and Education Programs % Support Preschool				port Preschool	
	Tuition Scholar	_				
≦	% Support Facili	ity Construction,	Renovation ar	d/or Repairs		
cknowled	laina Your Cift	& Legacy Societ	v			
		vledge our gift. Plea	_	ames as:		
_	n of my/our legac	= =	add to a perma	nent (endowmen	ft once it is realized t) fund at OCS, and	
Signature(s):			D	ate:	



Alternative/Additional Directions:						
Sample Language to include a planned gift as part of your will:						
I/we bequeath to One City Schools Foundation, Inc. (tax ID# 87-4101609), located in Madison,						
Wisconsin,% of my residual estate – OR – the sum of \$ to be used for charitable						
purposes set forth in a Statement of Intent or a Letter of Understanding held by One City Schools.						

One City Schools Foundation, Inc. tax ID # is: 87-4101609