## **ESTATE GIFT FORM**

Thank you for including a gift to The Open Door in your estate plan. This ensures the future of The Open Door's hunger relief efforts across Dakota County. Please utilize this form to clarify detailed information about your gift to ensure that it will be used in accordance with your wishes.



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Gift	Into	rm:	atio	n

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Will or Trust	Donor Advised Fund Remainder*	IRA/Retirement Plan*
Life Insurance*	Charitable Remainder Trust (attach c	opy) Other:
	ation/Company where the assets are held	
• .	nning purposes, the estimated value of th ntage of your estate or a specific asset, indicate th	
(ij your gijt is a percer	nage of your estate or a specific asset, malcate th	e approximate current value of your gift)
	formation you share with The Open Door,	
•	ntact information for your personal repre	•
administer your gi	ft. We understand the value and/or type	of gift may change over time. Please
notify The Open D	oor when/if changes occur. All information	on you share is strictly confidential.
Gift Designation	<b>n</b> (if multiple, indicate percentages. Space availab	ole below for special instructions.)
Donor Informat	tion	
	ot create a binding commitment. By signing this fo	orm you are simply acknowledging your
	fit The Open Door and giving direction as to how y	
Name:		_ Birthday:
Name (if applicable)	:	Birthday:
Address:		
City:	State:	_ ZIP:
	Email:	
Signature:		Date:

## Please return completed form to:

The Open Door 3000 Ames Crossing Road, Suite 100 Eagan, MN 55121

## **The Open Door Legacy Society**

All donors of planned gifts become members of The Open Door Legacy Society.
Please publish my/our name(s) as follows: (gift amounts are not published)
$\square$ Please do not publish my/our name(s). This gift is anonymous.
Special Instructions