



The Center of Anna Maria Island Letter of Intent

Our Mission: The mission of The Center of Anna Maria Island is to enhance the overall wellbeing of individuals of all ages, while preserving a sense of community through creative programs and partnerships.

This Letter of Intent is not a legal obligation. It is simply a statement of your present plans, which remain fully revocable and may be modified at any time.

Confidentiality: All information shared in this Letter of Intent will be held in confidence and used only to plan for the future of The Center of Anna Maria Island, unless you grant permission for public recognition.

Donor Information

Donor Name(s): _____

Address: _____

Phone: _____ Email: _____

Gift Intention

- Will or Trust
- Retirement Plan Beneficiary Designation
- Life Insurance Policy
- Other: _____

Gift Designation

- General Fund (to support annual operations and programs)
- Endowment Fund (to provide permanent support for the future)
- Capital Improvement Fund (to sustain and grow our facilities)
- Other: _____

Estimated Value (Optional)

The estimated value of my/our legacy gift is: \$ _____

Recognition Preferences

- By name: _____
- In honor of: _____
- In memory of: _____
- Anonymously

Gift Contact

Name: _____

Relationship: _____

Phone: _____ Email: _____

Professional Advisor (Optional)

Advisor Name: _____

Firm: _____

Phone: _____ Email: _____

Gift Use Flexibility:

If the designated purpose of my/our gift is no longer possible, I/we authorize The Center of Anna Maria Island to use the funds in a way that most closely aligns with my/our original intent. This authority may only be exercised by a super majority vote of the Board of Directors.

Acknowledgment:

This Letter of Intent is an expression of my/our current plans and may be changed at any time without obligation. By signing below, I/we affirm my/our intention to include The Center of Anna Maria Island in my/our estate plans.

Donor Signature: _____ Date: _____

Spouse Signature: _____ Date: _____

The Center of Anna Maria Island Representative: _____ Date: _____