

## **Bequest Allocation Form**

I/We have consulted my/our financial advisor and am pleased to inform the IFYE Association of the USA, Inc. of my/our planned gift intention. I/We understand that the IFYE Association of the USA, Inc. Tax ID number is 25-6085638.

At the appropriate time, I/we understand that my/our financial advisor and/or Attorney can visit ifyeusa.org to contact your Associate Treasurer or Treasurer to advise the IFYE Association of my/our pending donation to IFYE.

Financial Advisor	Mailing	City/ST Zip	Phone #	
Attorney	Mailing	City/ST Zip	Phone #	

The IFYE Association allocation is currently valued at: \$ \_\_\_\_\_(Optional) (Approximate amount) from my/our estate.

	Donor #1	Donor #2
Donor Name(s): As you		
would like them to appear in		
printed materials		
Donor Name(s):		
Date(s) of Birth:		
Signature(s):		
Signature Date(s):		
Address:		
Phone Number(s):		
Email Address(es):		

Please return completed form to IFYE Association of the USA, Inc. Postal Mail To: Roger Sherer, PO Box 452 Bluffton, IN 46714-0052 OR Email to: rsherer@ifyeusa.org

For questions or more information regarding planned giving, please contact: Roger Sherer (260) 307-2012