

AKRON BAR ASSOCIATION FOUNDATION
Major Gift Form

I wish to:

- | | |
|---|--|
| <input type="checkbox"/> Establish a named fund. | <input type="checkbox"/> Establish a charitable remainder trust. |
| <input type="checkbox"/> Establish a charitable lead trust. | <input type="checkbox"/> Establish a charitable gift annuity. |
| <input type="checkbox"/> Make a gift of cash or securities. | <input type="checkbox"/> Make a bequest. |
| <input type="checkbox"/> Establish a life insurance policy of which
the Foundation is owner and Beneficiary. | <input type="checkbox"/> Include the Foundation in my estate planning. |
| | <input type="checkbox"/> Obtain more information on the Foundation. |

The purpose of my gift is: Unrestricted Other: _____

The stated amount of my gift or bequest is: _____

Name: _____

Address: _____

Phone: _____

I have the following suggestions for Foundation projects: _____

Mail to: Akron Bar Association Foundation
Seven West Bowery Street, Suite 1100, Akron, OH 44308