



Planned Giving Statement of Intent

This statement is an expression of my intent to provide for the future of Oglebay Institute through a planned or estate gift. The provision(s) made include(s) the following (please select all that apply):

- An outright bequest upon the passing of the donor or the passing of the donor and spouse.
- A life insurance policy, in which Oglebay Institute is named as beneficiary or owner and beneficiary.
- Retirement assets, in which Oglebay Institute is named as a beneficiary.
- Other (please describe): _____

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

Purpose

It is my wish that the gift be used:

- At Oglebay Institute’s discretion, to create the greatest impact in our community by supporting its most compelling needs and opportunities.
- For the following existing fund(s) or purpose: _____

- To create the following fund (please provide fund name and purpose): _____

*Please note establishing a new fund requires a minimum gift of \$10,000.

I would like to work with Oglebay Institute to create a memorandum of understanding that details the purpose of my gift. Yes No

Continued on following page.



Recognition*

Oglebay Institute appreciates the opportunity to acknowledge your commitment to the community by publicly recognizing your contribution. If you prefer to remain anonymous, however, we will respect your wishes.

- I/We permit Oglebay Institute to use my/our name(s) in printed lists of planned gifts, which may appear in OI's annual report, newsletter, website, and/or other publications. I/We would like to be listed as follows: _____
- I/We prefer to remain anonymous during my/our lifetime(s). You may recognize my/our gift after you receive it, listing me/us as follows: _____
- I/We prefer to remain anonymous during and after my/our lifetime(s).

Donor's Signature

Date

Printed Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (H) _____ (W) _____ (C) _____

Email: _____

Date of Birth: _____

Spouse's Signature

Date

Printed Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (H) _____ (W) _____ (C) _____

Email: _____

Date of Birth: _____

*Note for couples: We are happy to list you either separately or as a couple, depending on your preference. If you would like to be recognized as a couple, please complete this form accordingly. If you are making separate planned gifts and prefer to be listed individually in all documents and/or publications, please submit separate forms, one in each name.

Thank you for your commitment to Oglebay Institute and your investment in our future. If you have any questions, please contact OI at 304-242-4200 or munderwood@oionline.com.