

## ASAE Foundation Annual Fund Leadership Society and Bequest Form

Name \_\_\_\_\_ Title \_\_\_\_\_

Organization \_\_\_\_\_

Preferred Address \_\_\_\_\_

City/State/Zipcode \_\_\_\_\_

Business Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Donors will be recognized in campaign materials unless an anonymous listing is requested.  
How would you like to be listed? (If you would like to be anonymous, please write Anonymous)

\_\_\_\_\_

This gift is:

- Anonymous     In Honor/Memory (circle one) of \_\_\_\_\_  
 Personal     Organizational/Corporate     Combination

Birthday: \_\_\_\_\_

Photo: (Please attach/send a photo of yourself)

### **LEADERSHIP SOCIETY**

Yes, I support the work of the ASAE Foundation and would like to make a minimum gift of \$25,000 or more, to the Foundation's Annual Fund. To qualify for leadership society status, gifts must be received in full within a period not exceeding 8 years.

- Emerald - \$25,000 - \$49,999  
 Ruby - \$50,000 - \$74,999  
 Sapphire - \$75,000 - \$99,999  
 Diamond - \$100,000+

My current intent is to give the ASAE Foundation a gift of \$ \_\_\_\_\_, to be paid in full by the end of calendar year 20 \_\_\_\_ .

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please choose one of the following payment options:

Please send me a reminder notice beginning on \_\_\_\_\_ and thereafter:

- Monthly     Quarterly     Annually     Other \_\_\_\_\_

**BEQUEST**

I/We have made provisions to include the ASAE Foundation in my/our will/estate planning.

My gift is currently valued at (\$10,000 Minimum) \$ \_\_\_\_\_, which is:

- Specific dollar amount
- A percentage of my estate's value ( \_\_\_\_\_ %)
- A part or all of the remainder of my estate ( \_\_\_\_\_ %)

I have included a gift to the ASAE Foundation Tax ID #52-1300485 through

- Bequest
- Trust
- Life Insurance Policy
- Retirement Plan
- Securities
- Bank Account
- Other (Specify) \_\_\_\_\_

I would like my gift to be:

- Unrestricted
- Restricted for a program to be discussed (restricted use gifts must be approved prior to acceptance)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for your generous support of the ASAE Foundation!

Please return completed form to the attention of:  
Stephen E. Peeler  
ASAE Foundation  
1575 I Street, NW, Suite 1100  
Washington, DC 20005  
202-626-2843  
speeler@asaecenter.org  
www.asaefoundation.org  
Tax ID: #52-1300485