



JOSEPH GIUNTA MUSIC DIRECTOR & CONDUCTOR THE LINDA AND TOM KOEHN ENDOWED CHAIR

Encore Society Membership Form

Letter of Intent for a Planned Gift

As evidence of my desire to provide a legacy of support for the Des Moines Symphony & Academy, I have made a provision for a gift in my estate plan. I understand this commitment is revocable, can be changed by me at any time, and is a record only of my current intentions.

It is my intent to leave a legacy to the Des Moines Symphony & Academy through my:

Will	
Living	Trust

□ Retirement Plan Assets (including IRA) □ Charitable Remainder Trust □ Life Insurance Policy □ Other

I wish to inform the Des Moines Symphony & Academy, for planning purposes only, that as of this date, the value of my gift is approximately \$_______. (If your gift is a percentage of an asset or of your estate, please indicate both the percentage and the approximate value.) I understand that by sharing an amount and/or percentage, my estate is not legally bound by this statement and I may choose to add, subtract, or revoke this bequest at any time, at my sole discretion.

Please describe the gift in sufficient detail so it can be readily identified: i.e., name of living trust, retirement plan account, life insurance policy number, insurance company, etc.:

If there is no designation in my planned gift document as to how the Des Moines Symphony & Academy is to use my planned gift when received, then my planned gift is to be used:

 \Box For the following described purpose, if possible:

 \Box In the area of greatest need as determined by the Des Moines Symphony Foundation Board of Directors

Please include me in the Des Moines Symphony's Encore Society under the following conditions:

 \Box Feel free to publish my name among your list of Encore Society members as motivation for others to leave a planned future gift to benefit the Des Moines Symphony.

□ Do not list my name. I prefer to remain anonymous.

Donor(s) Name(s):	 _	
Address:	 _	
City / State / Zip:	 _	
Signature:	Date:	