PELOTONIA®

Planned Giving Commitment Form

I/ We have included Pelotonia in my/our estate plans.

NAME:			DATE OF BIRTH:
NAME (if joint gift):			DATE OF BIRTH:
ADDRESS:			
CITY:	STATE:		ZIP CODE:
PHONE:		EMAIL:	

□ I/ We wish to be recognized in Pelotonia's Legacy Society and give permission to have my/our name(s) included at Pelotonia events and in published lists (publications, newsletters, donor recognition in office, and website) recognizing our planned gift donors. Please list my name (and/or my spouse's name) in the following manner:

 \Box I/ We wish to remain anonymous.

All information indicated below is considered confidential and is only used to track current and potential legacy and planned gifts to Pelotonia.

Type of Planned Gift:

Please describe your gift (or attach a copy of your gift documentation):

Bequest through will or trust	□ IRA, pension, or other retirement account
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Other (please specify): ______

The estimated current dollar value of my gift is \$ _____.

Purpose of Planned Gift:

□ The gift is unrestricted to provide maximum flexibility to Pelotonia.

 \Box The gift is directed to cancer research at The Ohio State University Comprehensive Cancer Center.

 \Box The gift is directed to cover Pelotonia operational costs.

Signature:	Date:
Signature:	Date:

Please return to Erika Walker at <u>ewalker@pelotonia.org</u> or 450 W. Broad St., Columbus, OH 43215. Completion of this form is a notification of intent only and not intended to be legally binding. Please discuss your planned giving intentions with your professional financial and legal advisors.