



MANNA Legacy Society
Confidential Membership Form



Welcome to the MANNA Legacy Society

The MANNA Legacy Society recognizes individuals who have included MANNA in their long-term financial plans through bequest provisions in their wills, trusts, life-income gifts, or other deferred gifts. Through your thoughtful planned gift, you are making a lasting commitment to MANNA and ensuring the organization’s fiscal health for generations to come. Thank you for making MANNA a part of your legacy.

Members of the MANNA Legacy Society have the option of allocating their legacy gift to one of the following areas:

- **General Fund** – Support our daily work providing medically tailored meals and nutritional counseling for people with chronic illnesses in our region.
- **Innovation Fund** – Support special projects outside of our daily work that can advance our mission in innovative ways.
- **Endowment Fund** – Support our investment fund that serves to provide long-term stability for MANNA and helps advance our mission in perpetuity.
- **The MANNA Institute** – Support research and evaluation efforts that serve to demonstrate the impact of our food as medicine programs.

Every pledged member of the MANNA Legacy Society will receive a commemorative enamel pin and, if they wish, receive recognition in MANNA’s annual report(s) and on a special donor wall in MANNA’s facility.

Please fill out the following information to help us track our planned gifts and grow the MANNA Legacy Society.

Printed name(s): _____

Date(s) of Birth: ____/____/____ & ____/____/____



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Legacy Gift Information

I/we am/are pleased to acknowledge that I/we have named MANNA as a beneficiary in my/our will, retirement plan, trust, life insurance policy, donor advised fund, or long-term financial vehicle.

I/we maintain that MANNA will (select one):

- Receive a sum of _____ dollars from my/our estate or other long-term financial instrument.
- Receive _____ percent of my/our residuary estate or long-term financial vehicle, which is valued at approximately _____ dollars as of today's date.

It is my/our desire for the legacy gift be used for (select one):

- MANNA's General Fund
- A specific purpose or area of MANNA you wish to support (specify below):
 Innovation Fund Endowment Fund The MANNA Institute (Research/Evaluation)

If you would like to be publicly recognized for your intended gift, please indicate how you would like your name(s) to be displayed. Otherwise, select the box indicating your desire to remain anonymous.

- I/we wish to be recognized for this gift under the name(s):
_____.
- I/we prefer to remain anonymous for this gift.

Please provide the name and contact information of a family member and/or financial or legal representative for MANNA to correspond with upon realization of the legacy gift.

Family Contact	Financial/Legal Representative
Name:	Name:
Relationship:	Company:
Email:	Email:
Phone:	Phone:

Please sign below to confirm the details included here and your intention to name MANNA in your estate plans.

Signature: _____	Date: _____
Signature: _____	Date: _____

If possible, please also send any documentation, such as beneficiary designation forms or pages from your will, codicil, or trust document in which MANNA is named.