

□ I/We are pleased to inform you of a planned gift to benefit Ronald McDonald House Charities of Arkansas & North Louisiana (RMHCAR-NLA). I understand that this commitment is revocable and can be modified at any time. I also understand that RMHCAR-NLA is not providing legal or tax advice to me concerning this, or any other planned gift. (Please print)

Name(s)	Birthday(s)			
Address	City	State	Zip	
Cell/Home Phone		Email		
Please check all that apply. Alth of your planned gift will help RI named RMHCAR-NLA as a perc NLA's percentage.	MHCAR-NLA as	we look to the	e future of he	elping families. If you have
Type of Gift:				Value or Percentage (optional)
□ Gift by Will □ Outright bequest □ Re	sidual bequest	(% of my	//our estate)	\$
□ Gift of Real Estate				\$
Please describe:				
Designation of Retirement	Plan / IRA Asse	ts		\$
Designation of Life Insurance	ce Policy			\$
Charitable Remainder Trus	t			\$
□ Revocable Living Trust				\$
Other Asset(s)				\$
Please describe:				
Special gift instructions (option (continue on back if necessary)	nal):			

□ I/We are happy to be recognized for our legacy gift as members of the *Legacy of Hope*. □ I/We would like our legacy gift to remain anonymous.

Signature/Date _____

Please return form to: Emily Piechocki, Development Director Ronald McDonald House Charities of Arkansas & North Louisiana 1501 West 10th Street, Little Rock, AR 72202 or by email to: emily@rmhcar-nla.org