

# Loving Hands Children's Home

## Legacy Loop Form



### ***Vision Statement***

Our vision is to maintain a reputation of honor and integrity while providing a world of compassion and excellence in growth and child care, with something positive to look forward to in each and every day.

### ***Mission Statement***

Our mission is to promote dignity and the highest esteem in our clients while providing safe and compassionate care. Our facility and care providers devote themselves to providing consistent, ethical and quality service. We believe that our service should exceed industry standards and reflect our benevolence and pride.

### **Donor Information**

(Please Print or Type)

**Name**

**Address**

**City, ST Zip Code**

**Phone**

**Fax or Email**

**Legal Representative**

**Legal Representative Address**

**City, ST Zip Code**

**Legal Representative Phone**

This form serves as a request to include Loving Hands Children’s Home in my Will or Trust. I give permission and bequeath Loving Hands Children’s Home the sum of \$\_\_\_\_\_ (or specific asset or \_\_\_\_\_ percent or residuary of my estate.) to be used for its general charitable purposes.

I am providing Loving Hands Children’s Home with a Charitable Gift Annuity (CGA) that will provide a lifetime, fixed income. I am making a donation of at least \$10,000 in cash or appreciated securities.

The CGA amount that I wish to contribute is \$ \_\_\_\_\_.

I am making the following change to contribute my retirement plan assets to Loving Hands Children’s Home. This serves to request that Loving Hand’s Children’s Home be named as beneficiary of my IRA, 401 (k), 403(b) or other retirement plan. In addition I will request a “Change of Beneficiary Form” from my retirement plan administrator.

On the form List Us as:     **Loving Hands Children’s Home**  
                                      **P.O Box 48004**  
                                      **Los Angeles, CA 90048**  
                                      **Phone (424)781-8194**  
                                      **Tax ID# 46-5661758**  
                                      **DUNS ACCT #079494982**

**It is very important to include the correct contact information for the legal representative handling your business affairs. (Please verify information & sign prior to mail/ email or fax)**

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

This Organization is a 501 (c)(3) Nonprofit Organization. All Contributions / Gifts are Tax Deductible.