

PLANNED GIFT

Statement of Expectancy*

As an	As an indication of my support to London Public Library, I/We			
to rep	ort that	t I/We have made the following commitment to London Public Library's future:		
	My/our Will contains a provision for London Public Library in the amount of \$ of the residue of my estate. (This information is optional; however, it does help London Public Library plan for the fut			%
	I/We have assigned London Public Library as:			
		Owner and beneficiary of a life insurance policy Beneficiary only of a life insurance policy The value of this policy is \$		
	The u	use of this gift is: Unrestricted Restricted, to be used for		
	I/We prefer my gift to remain anonymous in perpetuity.			
	I/We prefer to remain anonymous during my/our lifetime; however, when my/our gift is realized, I/We would like to be included in any donor listings. Please list my/our name as:			
	To encourage others to support London Public Library, I/We would be willing to share my/our testimony in relevant materials upon request.			
	Signa	ture Signature		
	Date	Date		

Legal Name and Mailing Address:

London Public Library 251 Dundas Street London ON, N6A 6H9

Charitable Registration Number: 119024065RR0001

For more information please contact:

Emily Schinbein, Director, Financial Services at 519-661-5100, Ext. 5144 or emily.schinbein@lpl.ca *Please note that this confidential information is for our use only. It is not a legally binding