



**FAX TO:** Larry Timm, JA of Central Illinois, 309-673-0115

**FROM:** Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Fax: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_ Email: \_\_\_\_\_

I have included Junior Achievement of Central Illinois, Inc. in my estate planning.

Junior Achievement of Central Illinois is named as my beneficiary in my:  
 (check below as many as appropriate)

- |  |  |
|--|--|
| <input type="checkbox"/> Will                                | <input type="checkbox"/> Charitable Remainder Unitrust |
| <input type="checkbox"/> Charitable Gift Annuity (immediate) | <input type="checkbox"/> Charitable Lead Trust         |
| <input type="checkbox"/> Charitable Gift Annuity (deferred)  | <input type="checkbox"/> Retained Life Estate          |
| <input type="checkbox"/> Charitable Remainder Annuity Trust  | <input type="checkbox"/> Life Insurance                |
| <input type="checkbox"/> Other (describe) _____              |  |

For publication purposes, I would like my name to appear exactly as printed below: (Remember to include spouse's name if applicable):

	<b>You</b>	<b>Spouse</b>
First Name(s):	_____	_____
Middle Name(s):	_____	_____
Last Name(s):	_____	_____
Date of Birth:	_____	_____
	(month, day, year)	(month, day, year)
Wedding Anniversary: (if applicable)	_____	
	(month, day, year)	

To help JA expand its Planned Giving Program and in order to encourage others to follow in your footsteps, please attach with a brief testimonial outlining why you have chosen to include Junior Achievement in your estate planning.

By signing this form, the undersigned gives JA permission to publish and include his/her name (and spouse's name if applicable) and reprint his/her testimonial in its Annual Report, on its Website, in its newsletter and in other recognition pieces.

\_\_\_\_\_  
(Sign here)

Attachment: Testimonial and digital photograph