

Statement of Intent

Please complete this form and return it to hpf@ihfa.org or fax to (208) 331-4808.

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

I/we have made provision for a gift to the Home Partnership Foundation. I would like my gift to help support:

- Unrestricted (funds will be directed by the Foundation board)
- Emergency Shelter and Transitional Housing Program
- Self-Sufficiency and Asset Building Program
- Homelessness Prevention Program
- Home Equity Partnership Fund, please specify location _____
- Charitable Land Donation
- Endowment
- Directed Gift (to support a specific Idaho shelter or housing organization), please specify recipient _____

Type of charitable gift donated:

- Charitable Gift: Enclosed is a gift of \$ _____
- Deferred Gift
- Bequest
- Charitable Remainder Trust
- Charitable Gift Annuity
- Life Insurance

I would like to be recognized for my gift:

- Please recognize this gift from (specify donor, family, organization, or company names)

- Please designate my gift "In memory of" _____
- Please designate my gift "In honor of" _____
- I/we have made provision for a gift, but prefer confidentiality and do not wish to be recognized.
- I/we wish to consider a gift to the Home Partnership Foundation. Please contact me to discuss my options.

This Statement of Intent is non-binding.

Signature _____ Date _____