



## Letter of Planned Gift Intent

I wish to inform you that I have made a provision for the Radiation Oncology Institute (ROI) through my estate plans.

I understand that I retain the right to amend my estate plans, but I am pleased to provide this statement as an indication of my plans for the future. I have provided for the Radiation Oncology Institute through my:

- Will or Trust
- Charitable Remainder Trust
- Life Insurance Policy
- Other \_\_\_\_\_

in the approximate amount of \$ \_\_\_\_\_.

My participation in the ROI Planned Giving Program qualifies me for membership in the "ROI Legacy Society."

- You can use my name as a donor.
- I prefer to keep my commitment anonymous.

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DONOR SIGNATURE

DATE

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DONOR *(please print name as you would like to be recognized. If care to have spouse name included, please specify.)*

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail \_\_\_\_\_

RETURN TO:

**ROI**  
251 18th Street South  
8th Floor  
Arlington, VA 22202  
Phone: 703-502-1550  
Fax: 703-502-7852