

**Dorset Community Foundation
Letter of Wishes Agreement**

Please complete this Letter of Wishes to tell us how you would like your charitable legacy to Dorset Community Foundation to be managed.

Your details:

Title (Mr/Mrs/Ms/Dr/Sir etc.)	
Name	
Suffix/Letter (OBE etc.)	
Date of Birth	
Address	
Telephone	
Mobile	
Email	

Details of the legacy you have gifted to Dorset Community Foundation:

(It is not necessary to share the details of your gift at this stage but it is helpful information for Dorset Community Foundation to help plan your legacy)

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Your wishes

I set out below how I wish Dorset Community Foundation to manage any legacy I gift to the Foundation. I wish my gift to be used to:

If more than one purpose, please indicate proportion in right hand box

<input type="checkbox"/>	Add to an existing Named Fund with Dorset Community Foundation and the revenue to be distributed in accordance with the purposes of that Fund. Please write the name of current Fund	
<input type="checkbox"/>	Establish a new Named Fund with Dorset Community Foundation as detailed in section 1 below	
<input type="checkbox"/>	Be distributed to the named charitable organisations as specified in section 2 below	
<input type="checkbox"/>	Support Dorset Community Foundation's General Fund to support grant-making and social investment in line with community needs	
<input type="checkbox"/>	Support the activities of Dorset Community Foundation at its discretion	

Note: Any balance remaining will be divided in proportion as set out above.

Section 1: Establishing a new Named Fund

1.1 Name of Fund:

1.2 Type of Fund

- Endowment Fund*
- Flow-through Fund
- Combination Fund
 - Amount or % as endowment: %
 - Amount or % as flow-through: %

*Recommended minimum amount of £25,000 to establish a Named Endowment Fund.

1.3 Purposes of the Fund

Please indicate your wishes in terms of the purposes (and focus for) the Fund:

- General community benefit in line with community needs
- Children, young people & families
- Older people
- People with disabilities or life-limiting health conditions
- Supporting disadvantaged communities
- Other:

Please indicate your wishes in terms of the geographical focus for your Fund:

- Dorset-wide
- Other area:

Please describe any other specific wishes you have in relation to the purposes of the fund such as any particular exclusions.

1.4 Fund Advisers

I wish for:

- The following individuals to be invited to be Fund Advisers whose privileges will be to recommend grant recipients from shortlists prepared by Dorset Community Foundation in line with the purposes set out above, and whose recommendations will be taken into account when grants are made from the Fund (*Include details below*).

	Primary contact:	Second contact:
Title (Mr/Mrs/Ms/Dr/Sir etc.)		
Name		
Suffix/Letters (OBE etc.)		
Company/Organisation (if applicable)		
Address		
Telephone		
Mobile		
Email		
Age if under 18 at date of this agreement		
Relationship to donor/advisor		

Section 2. Specific Beneficiaries

I would like Dorset Community Foundation to distribute grants to the named charitable organisations below as follows:

Name of Charitable Organisation	Charity Number (if known)	Amount you wish to be distributed +

+ fixed amount as a one-off/annual grant or % of total fund revenue as a one-off/annual grant

Confidentiality

After my death, I am happy for:

- my legacy to be acknowledged in Dorset Community Foundation's publications and communications
- this information to be shared with members of my family as detailed below
- this information to be shared with my executors

If none of the above is ticked, we will only publicise the Named Fund (e.g. for grant-making purposes) if one is set up.

Agreement

I wish Dorset Community Foundation to manage the legacy that I have gifted as set out in this Letter of Wishes. I have read and accept the terms of the Community Foundation's Gift Acceptance policy and I understand that a contribution will be made to the Foundation itself towards its general operating costs from my legacy as set out in the policy.

I understand and agree that my gift, once received by the Community Foundation, becomes an irrevocable gift which may be distributed by the Trustees of the Community Foundation at their discretion for the purposes set out above. Any recommendations made by Fund Advisers will be taken into account when grants are made but will not bind the Community Foundation or its Trustees.

I agree that the Community Foundation must be able to be flexible in meeting community needs in the future and that the Trustees of the Community Foundation shall be able to amend any restrictions applying to the use of my gift at their sole discretion if at any time they believe that those restrictions (a) cannot be satisfied, or not in accordance with my original wishes or the original spirit of the gift, or (b) have become impractical, unsuitable, irrelevant, obsolete or undesirable, provided that my gift must always be used for purposes that are charitable under English law.

This letter of wishes overrides and supersedes any previous Letter of Wishes that I have signed in respect of my legacy to Dorset Community Foundation.

Signature	
Print Full Name	
Date	

On behalf of Dorset Community Foundation:

We acknowledge receipt of this Letter of Wishes and agree that we will manage any legacy gifted to us in line with this Letter of Wishes and our Gift Acceptance Policy.

Authorised Signature	
Print Full Name	
Title/Position	
Date	

If you need any more details please contact our Chief Executive Tracy Melling on 01202 292255 or at tracy@dorsetcf.org.