



PLANNED GIVING RESPONSE FORM

For more information, or to let us know that you have included IMS in your estate plan, please complete and return this confidential reply form.

Name \_\_\_\_\_

Address \_\_\_\_\_

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

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

I would like to receive information on supporting IMS through:

- Bequests/Wills
- Life Insurance Policy
- Retirement Fund
- Gifts of Appreciated Assets

Please call me. The best time to reach me is \_\_\_\_\_

I have already named IMS as a beneficiary of my estate through my:

- Will
- Retirement Plan
- Life Insurance Policy

**Please mail your completed form to:**

**Insight Meditation Society  
Attention: Development Office  
1230 Pleasant Street  
Barre, MA 01005**

Or contact our Development Office  
at (978) 355-4378 ext 230  
or [development@dharm.org](mailto:development@dharm.org).