

Statement Of Testamentary Provision

| Name (as you would like | e to be recognized and have it publishe | ed) |
|--|---|---|
| As a member of the Arizona Humane Society (AHS) Leg Mason Pulliam Campus for Compassion (unless you requ | | ted on our donor wall at the Nina |
| Do recognize on the donor wall or in AHS publicationDo not recognize or publish. I/we choose to be a | • | _ |
| In order to properly reference AHS in your planning docu We are a 501(c)3 Arizona nonprofit organization, our fed Dobbins Road, Phoenix, AZ 85041 . | | |
| To assist AHS in recordkeeping and future budget planning is for planning purposes only and is not legally binding. | ng, please answer the questions be | elow. Please note that this information |
| DESCRIPTION: | | |
| General description of type of provision (will, revocable t | rust, retirement account, other - pl | lease describe): |
| Definition of provision (percentage of total estate, specif | c dollar amount, other - please de | scribe): |
| Name and contact information of attorney or trust admir | istrator, if applicable: | |
| With the understanding that values are subject to change gift to AHS to be valued at approximately \$ | | nge, I/we anticipate my/our future |
| PURPOSE: | | |
| ☐ This gift is unrestricted and may be used where | the need is greatest at the time. | |
| \square The gift is to be used for the following purpose: | | |
| CONTINUING CARE: | | |
| As an exclusive benefit of membership in the Legacy Circ program. Pets enrolled in Continuing Care are placed wit | | |
| SIGNATURES: | | |
| | pate:E | Birth Date: |
| | Pate:E | Birth Date: |
| | | |

_____ E-mail: _

Telephone: (home)