

Donor Intent Form

I am pleased to join the Curative Connections Legacy Society. I understand that my gift will help create a sustainable future for Curative Connections and ensure they are able to provide programs that help people achieve their goals for independence for years to come.

Please use the form below to let us know more about your intended gift. The information that you share here is not legally binding and will only be used to welcome you to our Curative Connections Legacy Society.

Name(s): _____

Date(s) of Birth: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

My Legacy Gift is defined in my will or estate plan to benefit Curative Connections. It includes (check box):

A specific dollar amount: \$ _____

A percentage of my estate: _____%

The residual of my estate: _____

I have included Curative Connections as a full or partial beneficiary of retirement assets, life insurance policy, IRA, retirement plan, or other estate provisions.

I have named Curative Connections as a beneficiary of (check box):

Will

Revocable Trust

Irrevocable TrustWill

Charitable Remainder Trust

Charitable Lead Trust

The approximate value of our gift is: _____

(Not required, however it is appreciated to help us plan for our future)

I would like my estate to be designated for the following purpose (check box).

Unrestricted (directed to the areas of greatest need)

Restricted

Programming: _____

Capital Improvements: _____

Endowment: _____

I would be pleased to be publicly recognized for this gift as the name(s) noted here. The terms of my gift will remain confidential to the public. _____

I prefer to remain anonymous.