



DECLARATION OF INTENT

I/We have provided support for the mission and goals of Ascentria Care Alliance with one or more of the following planned gifts.

1. My/Our gift is made through

- Bequest commitment
- Life Income Plan (please specify type): _____
- Other: _____

2. With a current fair market value of: \$ _____

3. This commitment is to be used for:

- The priority needs of Ascentria Care Alliance.
- The priorities of the following Ascentria client center or program: _____
- To create a named endowment (please specify): _____
- Other: _____

4. This Declaration of Intent is an expression of my/our present plans and is subject to revocation or modification at any time. It is not legally binding on my/our estate. I/We have attached a copy of the portion of my/our will or living trust that describes my/our provision that will support Ascentria Care Alliance.

5. Because I/we have made a planned gift commitment:

- Please include me/us, without disclosure of amount, in the Brook Farm Society, a listing of legacy givers. I/We would like my/our names(s) to appear as follows:

- Please do not list name(s) in the Brook Farm Society.

6. I/We confirm this planned gift commitment:

Name (please print)

Name (please print)

Signature

Signature

Date

Date