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:

<table>
<thead>
<tr>
<th>Name (please print)</th>
<th>Name (please print)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signature</td>
<td>Signature</td>
</tr>
<tr>
<td>Date</td>
<td>Date</td>
</tr>
</tbody>
</table>

Ascentria Care Alliance
14 E Worcester Street, Suite 300 | Worcester, MA 01604 | 774.243.3900