### Declaration of Bequest Intention

By completing this form you signify your intention to name Family Renew Community as a beneficiary of your estate and your wish to become a member of Abiding Angels, which honors those who have made legacy gifts to Family Renew Community. Family Renew Community understands that bequest provisions are revocable and that any intentions stated here are not binding on you or your estate. We are deeply grateful for your vision and generosity.



#### I have named Family Renew Community as a beneficiary of: (Check as many as apply)

- □ My Last Will and Testament
- $\Box$  Retirement Account
- □ Revocable Trust (Living Trust)
- $\square$  Life Insurance Policy
- □ Other (please specify) \_\_\_\_\_

#### My provision(s) names Family Renew Community as:

- □ Primary Beneficiary
- □ Secondary Beneficiary
- □ Contingent Beneficiary

I estimate that the total value of my gift to Family Renew Community through my estate will be \$

## If/when this gift is received by Family Renew Community, it is my wish that the organization use my gift for the following purpose:

- □ General Purposes/Area of Greatest Need
- 🗆 Other \_\_\_\_\_

# I understand that my commitment to leave Family Renew Community a legacy gift through my estate entitles me to enrollment in Abiding Angels, and special recognition during events and in publications.

□ Yes, Family Renew Community may publish my name as a member of Abiding Angels

 $\Box$  I am pleased to become a member of Family Renew Community's Abiding Angels, but I wish to remain anonymous and request that my name not be published in connection with my bequest intention

Signature	Printed Name	Date
Signature	Printed Name	Date
Telephone:	Email:	

To facilitate our ability to honor the intentions set forth above, we would greatly appreciate a copy of your Will or Trust (or appropriate sections thereof) for safekeeping in our confidential files. Thank you.

Family Renew Community, 810 Ridgewood Ave., Holly Hill, FL 32117 (386) 239-0861