



Bequest Intention Form

We Want To Thank You! Please use this form to notify us of the details of your bequest intentions for Easterseals Colorado. In recognition of your disclosure, we will be honored to invite you to join the Sunburst Legacy Society, a select group of donors that have created a future gift intention for Easterseals Colorado.

This intention form is for informational purposes only - your estate is not legally bound by submitting this statement. Your commitment remains revocable and can be modified at any time.

Donor Information (please print or type)

Name(s):	Age(s):	
Address:		
City:	State:	ZIP Code:
Telephone:	<input type="checkbox"/> cell	<input type="checkbox"/> home
Fax:	E-mail:	

Bequest Specifics

As evidence of my/our desire to provide a legacy of support for people living with disabilities in our community, I/we wish to inform Easterseals Colorado that you have been named in my/our estate plan.

As of this date, the approximate value of my/our gift is \$_____ (*optional*)
(If your gift is a percentage of your estate, please indicate the approximate present value of that percentage.)

I/we designate this gift to be used for:

Unrestricted Support (where the need is greatest as determined by the Easterseals Colorado Board of Directors

OR

To the following department or program:

Acknowledgment Information. Please use the following name(s) in all acknowledgments:

I (we) wish to have our gift intentions to remain anonymous.

Donor(s) please sign and date below

Signature(s): _____ Date: _____