

Please return completed form to: **Humane Society of Summit County** c/o Louise DiLullo 7996 Darrow Rd. Suite 30 Twinsburg, OH 44087

Humane Society of Summit County Legacy Society

Planned Gift Disclosure Form

Thank you for your commitment to animal welfare and your decision to make the rescue, care, and adoption of companion animals your legacy. By disclosing your estate planning intentions, you allow the Humane Society of Summit County to plan for a bright future and a safe community for animals in need.

Your declared commitment of a planned gift automatically enters you into a special group of likeminded philanthropic supporters: **The Humane Society of Summit County Legacy Society**. As a member, you will receive an annual Legacy Society Newsletter, an enamel pin reserved exclusively for Legacy Society Members, and any future benefits determined including invitations to private Legacy Society events.

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I,, have made a provision for the Humane Society of Summit County in my estate plan in the following way(s):	
☐ Charitable Bequest☐ Percentage (%)☐ Specific Am	ount (\$) □ Contingency Beneficiary
☐ Charitable Remainder Trust ☐ Charitable Lead Trust ☐ Other	
☐ Asset such as life insurance policy, securities may be contingent on approval by the HSSC Pr	s, real estate; please describe below (acceptance resident/CEO):
☐ Retirement Plan Beneficiary* ☐ Life Insura	nce Beneficiary*
Contact Name	Plan #
Company	Phone #
*Administrator contact information need	led for gift completion
Optional □ Amount of Gift □ Copy or excerpt of document enclosed Please use the following name(s) for recognition of	□ Date of Birth □ I don't wish to receive Legacy Society benefits my/our Planned Gift:
☐ I wish to remain anonymous to the public. Please do I	•
Name/Title	Name/Title
Company	Company
Address	Address
City, State, Zip	City, State, Zip
Please sign and date this form for our records:	
Name	Date

Thank you for making care for animals part of your legacy!