

DECLARATION OF BEQUEST INTENTION Donor Documentation Form

If you have included a gift for Planned Parenthood of Montana in your estate plans, please complete the steps below.

01 Type of bequest. My/our future gift is from:

- Will / Living Trust Bank, Brokerage, or Other Financial Account
 IRA / Retirement Account Other (please specify) _____
 Charitable Remainder Trust

02 Amount of bequest. My/our future gift is:

- Estimated to be worth \$ _____
 The specific amount of \$ _____
 An amount that I/we wish to keep private

Planned Parenthood of Montana understands that all bequest provisions are revocable and that any intentions stated here are not binding on you or your estate.

03 Contact information:

NAME

ADDRESS (CITY, STATE, ZIP)

PHONE

EMAIL

04 Recognition. I/We would like to be listed as follows:

NAME(S)

I/We prefer to remain anonymous.

SIGNATURE

DATE

Please complete this form and return to:

Planned Parenthood of Montana
giving@ppmontana.org
1643 Lewis Ave, Suite 211, Billings, MT 59102