



# PLANNED GIVING COMMITMENT FORM

I/We have included the ASHP Foundation in my estate loans.

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

I wish to be recognized in the ASHP Foundation Legacy Society as follows:

\_\_\_\_\_

I wish to remain anonymous.

## Type of Planned Gift:

- Bequest through will or trust
- Life insurance policy beneficiary
- Retirement plan/IRA
- Charitable gift annuity
- Charitable remainder trust
- Charitable lead trust
- Living trust
- Other trust
- Other \_\_\_\_\_

Please add any other details you wish to share: \_\_\_\_\_

*All information provided will be kept strictly confidential.*

## Purpose of Planned Gift:

- The gift is unrestricted to provide maximum flexibility for the ASHP Foundation
- I have a purpose in mind that I would like to discuss with you.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE RETURN TO:** Martha Crews, Vice President for Development, ASHP Foundation, 4500 East-West Highway, Suite 900, Bethesda, MD 20814

Completion of this form is a notification of intent only and not intended to be legally binding. Please discuss your planned giving intentions with your professional financial and legal advisors. The ASHP Foundation is a tax-exempt nonprofit organization recognized by section 501 (c)3 of the internal Revenue code. Tax ID # is 23-7033369. Contributions are tax deductible to the extents allowed by law.