

ARIZONA FOUNDATION FOR WOMEN

Safety. Health. Economic Empowerment.

Arizona Foundation for Women Planned Gift Intention Form

I/We (legal name(s)) _____

Currently residing at _____

Have made an estate provision for the benefit of _____

Through a will trust life insurance policy pension beneficiary designation

checking account beneficiary designation other _____

A copy of the document is enclosed.

The estimated current amount of our gift is \$ _____.

The gift is for a specific amount a percentage of the remainder.

The professional contact person for this gift is:

Name, Title _____

Company _____

Address _____

Phone _____

Email _____

You may list me/us as a member of the Endowment Fund Yes No

and in publications/ on the website, etc. with gift amount without gift amount

Signature _____ Date _____

Signature _____ Date _____

Please reach out to Mesha Davis, CEO, with any questions at (602) 875-5160, and send completed form to mesha@azfw.org.

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