CONFIDENTIAL DEFERRED GIFT INFORMATION FORM

DEFERRED GIFT

I/we, _______________________________________, have made provision for the Maryland SPCA, Inc. (EIN: 52-6001558), a Maryland nonprofit organization located at 3300 Falls Road, Baltimore, Maryland, 21211, in my/our estate plan.

I/we give _________________ [dollar amount or percentage] of the following to the Maryland SPCA:

- ☐ My/our last will and testament.
- ☐ Life insurance policy.
- ☐ Charitable trust or gift annuity.
- ☐ Retirement plan.
- ☐ Other [please specify]: ________________________________________________________________

GIFT DETAIL AND DESIGNATION

I/we intend for my/our gift to serve the following purpose(s). Please specify the percentage up to 100%

- ☐ Where most needed as determined by the Maryland SPCA at the time of receipt. ________%
- ☐ The Brownie Fund to care and find forever homes for shelter pets. ________%
- ☐ The Lucy Community Fund to keep pets in homes and strengthen the pet/family bond. ________%
- ☐ Other [please specify]: ____________________________________________________________ ________%

Total: 100%

I/we understand that, prior to receipt, the Maryland SPCA Board of Directors may have determined that the purpose(s) I/we have selected are no longer needed or serve the organization’s mission. In that case, the Maryland SPCA will redirect my/our gift to approximate my/our intentions most closely as existing policy, good conscience, and need dictate.

ADDITIONAL DETAIL

- ☐ I/we are enclosing a copy or excerpt of a document signifying my/our estate planning intentions.
- ☐ My pet(s) is/are enrolled in the Maryland SPCA’s Legacy of Care program.
- ☐ I/we wish for my/our pet(s) to be enrolled in the Maryland SPCA’s Legacy of Care program.
- ☐ I/we have notified my/our estate executor, ________________________________ of our intentions.
RECOGNITION

☐ I/we grant permission to The Maryland SPCA to publish my/our name as follows in a list of members of the Friends Forever group. The type of deferred gift will not be disclosed.

__________________________________________________________
please print

☐ I/we wish to remain anonymous to the public. Please do not list my/our name.

SIGNATURE

Sign: __________________________________________________________
Date: ________________