

Thank you for your intention to include Pikes Peak Habitat for Humanity in your estate plan. To accurately document your intention, please complete this form (in pen or electronically) with as much detail as you are willing to share.

□New Intention	☐Updated Intention		
My/Our Information:			
I/we desire to provide for the future well-being through a provision in my/our estate plans, and Habitat for Humanity of my/our plans. I/we und revoked or modified by me/us at any time.			
Full Name (print)	Birthdate (mm/dd)		
Spouse/Partner Name (if joint gift)	Birthdate (mm/dd)		
Address, City, State, Zip			
Phone Er	mail address		
Gift Inf	ormation:		
I/we have provided a gift to Pikes Peak Habitat for Humanity through my/our:			
□Will □ Retirement plan or IRA □ Living trust	□Life insurance policy □Other:		
Please tell us about your gift designation:			
☐I would like this gift to provide for a specific p☐Pikes Peak Habitat for Humanity may use th			
the current value of my/our future gift is \$your gift is a percentage of your estate, please			
	Initial(s)		

Please return this form to: Pikes Peak Habitat for Humanity, Office of Planned Giving

3730 Sinton Rd., #100, Colorado Springs, CO 80907



## **Gift Recognition (choose one):**

$\square$ You may publish my/our name recognition lists as a motivation to		k Habitat for Humanity through legacy gift e a future gift to benefit Habitat.	
Please list name(s) as de	sired for recogn	ition	
☐ I/we do not want my/our name	es published.		
<u> </u>	State Contac	t Information:	
Executor/Trustee (if your gift is Will or Trust):	s through a	Administrating Company (i.e. Thrivent, Vanguard, etc. if your gift is through a retirement account or life insurance policy):	
Name:		Name:	
Address:		Address:	
City, State:		City, State:	
Zip Code:		Zip Code:	
Phone:		Phone:	
Email:		Email:	
Additional Contact/ Relationsh	ip you may wa	nt us to know (family, attorney, etc.)	
Name:		Relation:	
Address:	City, State: _	Zip Code:	
Phone:	Email:		
		Initial(s)	



will remain	confidential. Pikes Peak Habitat for Humanit nay be revoked or changed by me/us at any	y understands that the size of my/our
Date	Signature	
Date	Spouse/Partner Signature	
	ou for declaring your intent to include Pikes P nned gifts, like yours, contribute to future affo Paso County.	
	Ipon submission of this form, you will receive from a member of the Office of Planned Giv	
	Please keep a copy of this docum	ent for your records.
OFFICE OF PLANNED GIVING USE ONLY		
Date Received	Office of Planned Giving Signature	Printed Name
		Title