



PLANNED GIVING DECLARATION OF INTENT

Thank you for your intention to include the Fisher Center for Alzheimer’s Research Foundation in your estate plan. In order to accurately document your intention, please complete this form with as much detail as you are willing to share. Any information about your gift will remain confidential and does not create a binding obligation.

Recognition of Your Planned Gift

For recognition purposes, please list my/our name(s) as follows:

Please do not include my/our name in any public listings of donors.

I/We wish for my/our gift intention to be confidential and anonymous, publicly and in the Fisher Center for Alzheimer’s Research Foundation records.

Restrict my/our gift to research.

Gift Agreement/Letter – I/We have signed a Gift or Letter Agreement with the Fisher Center for Alzheimer’s Research Foundation for this gift and have made no changes to the designation or purpose.

No Gift Agreement/Letter – Briefly describe allocation, designation, and how your gift should be used.

Description and Value of Gift – Please indicate below (by checking applicable options), how your future gift intention will be fulfilled, and provide the estimated value for the Fisher Center:

Description	Amount or Percentage	Estimated Amount of Gift to the Fisher Center
Will or Trust with a sum of	_____	_____
Remainder of Retirement Fund/IRA with a total current value of	_____	_____
Life Insurance Policy with a policy value at maturity of	_____	_____
Other Item or Asset in the amount of	_____	_____
Please describe (for example, private collections, real estate, securities, etc.):		

Beneficiary – If the Fisher Center is only a contingent beneficiary, please explain conditions.

Documentation – Please provide us with copies of any documents (or the relevant pages) that include provisions for the Fisher Center for Alzheimer’s Research Foundation.

Please Complete Reverse Side

Contact Information

Will or Trust – If your gift is included in a will or trust, please provide the following:

Executor(s) or Trustee(s)

Name and Address

Phone and/or Email

Beneficiary Designation – If your gift is directed by a beneficiary designation, please provide the following:

Administrator or Company

Name and Address

Phone and/or Email

Other Information, Contacts and Relationships You Want Us to Know (family, attorney, etc.)

Name and Address

Phone and/or Email and Relationship

Though this intent form is an expression of my current plans, I understand that it is not a legal obligation and is non-binding. I may modify or revoke these plans at any time.

New Intention – This is a new bequest intention to the Fisher Center for Alzheimer’s Research Foundation.

Update to Intention – This is an update to a previously recorded bequest intention to the Fisher Center for Alzheimer’s Research Foundation.

Signature Date

Signature Date

Print Name

Print Name

Street Address

Street Address

City, State, Zip

City, State, Zip

Email Phone Number

Email Phone Number

Please send this form (together with copies of any documents) to the attention of the Development Department, we can be reached at 212.915.1328 if you have any questions or concerns.

Mailing Address: The Fisher Center for Alzheimer’s Research Foundation, FDR Station, PO Box 220, New York, NY 10150