Human Kind

Planned Gift Notification Form

Thank you for including Presbyterian Homes and Family Services, DBA HumanKind inyour estate plans. When your plans are complete, please return this form to:

When your gift request is complete, please return this form to:

HumanKind, Attn: Angie Miller, 150 Linden Ave, Lynchburg, VA 24503

Or fax to: (434) 384-6148

We will hold this information completely confidential. If you have any questions please contact Angie at 434-485-8138 or amiller@humankind.org.

Name(s):			
Address:			
City:	State:	Zip Code:	
Phone:	Email:		
Date of Birth (optional):			
Bequest amount or percentage	:		
Plan Type (will, trust, beneficiary You may enclose a copy if you wish.	y designation, e	etc.):	
We like to acknowledge our Maxwe includingtheir names in publicatio you would like to be listed.			f
Yes, I/we would like to be lis should appear as:	ted. My/our nam	e(s)	
No, I/we do not wish to be li	isted.		

Please use this space to provide any additional information: