



Planned Giving Statement of Intent Form

I/We have made a planned gift to **Partnership for Families, Children and Adults** on _____ (Mo/
Day/Yr) through:

- My/Our will
- A Trust
- Life insurance policy
- IRA Account
- Other _____

Please check one:

- A specific amount of \$ _____
- A percentage of Estate (estimated value: \$ _____)
- Remainder of Estate (estimated value: \$ _____)
- In Honor of: _____
- In Memory of: _____

Recognition name(s): _____

- I/We wish to remain anonymous

Donor Name(s): _____

Address: _____

City/State/Zip: _____

Phone: _____ **Email:** _____

Optional: We welcome attachments that further describe your gift as well as copies of the sections of wills, trust, insurance policy or other documents that mention Partnership for Families, Children and Adults.

Donor Signature(s)/Date: _____

Please complete and mail this form to:

Attention: Amy Carlton
Partnership for Families, Children and Adults
1800 McCallie Avenue
Chattanooga, Tennessee 37404