



DECLARATION OF INTENT

To: USA Cares, Inc.
Attn: Outreach & Development
11760 Commonwealth Drive
Louisville, KY 40299

Date _____

I have remembered USA Cares, Inc. in my estate plans through:

☐ **A will for:**

- ☐ A specified amount
- ☐ A specified percentage
- ☐ A specified piece of property

☐ **A trust for:**

- ☐ A specified amount
- ☐ A specified percentage
- ☐ A specified piece of property

☐ **Life insurance (be sure to update beneficiary form to reflect the gift)**

☐ **IRA, 401k, brokerage account, or retirement plan (be sure to update your beneficiary form to reflect the gift)**

☐ **Other (please specify) _____**

Please consider providing us a copy of your will, trust, or beneficiary forms for safekeeping. We will treat your forms confidentially.

I estimate the current value of my gift as: \$ _____

- ☐ USA Cares may include my (and if applicable, my spouse's) name in the Bill Roby, Sr. Legacy Society listing. Neither amount nor designations are published.

Please list as: _____

- ☐ I am honored to be included in the Bill Roby, Sr. Legacy Society, but I prefer to remain anonymous. Please do not include my/our name in the Bill Roby, Sr. Legacy Society listing.

Donor Information

Reviewed By

Print Name

Signature

Staff Member, USA Cares

Address

City

State

Zip Code

President & CEO , USA Cares

Phone

DOB

Email