

DECLARATION OF SUPPORT

I have made provisions to include PROLIFE Across AMERICA in my estate plans because I wish to support the efforts of the organization to change hearts and save babies' lives.

This declaration of intent IS NOT A BINDING LEGAL OBLIGATION and I may change it at any time.

Please check one:

- PROLIFE Across AMERICA may include my (and, if applicable, my spouse's) name in The Culture of Life Legacy Society listings (neither amounts or source of funds will be included.)
- I am honored to support PROLIFE Across AMERICA, however, I wish to remain anonymous. Please do not list my/our name in The Culture of Life Legacy Society listings. The commitment should appear "Anonymous".

Donor Contact Information:

Name(s): _____

Phone: _____

Address: _____

City, State, ZIP: _____

Email: _____

I have named PROLIFE Across AMERICA as a beneficiary of my:

- Will/ or Trust
- Life Insurance Policy
- Named Beneficiary of a Financial Account, IRA and/or Qualified Retirement Fund
- Other: _____

Currently, I anticipate my gift will be valued at approximately: _____

Name of Executor, Personal Representative or Trustee:

Name: _____

Phone: _____

Address: _____

City, State, ZIP: _____

Email: _____

Please return the completed Declaration of Support form by emailing it to plannedgiving@prolifeacrossamerica.org or mail it to:

PROLIFE Across AMERICA
P.O. Box 18669
Minneapolis, MN 55418

