

Letter of Intent



Thank you for including PROLIFE Across AMERICA in your estate plans!

Welcome to the **Culture of Life Legacy Society!** Please share about your legacy gift so we can understand the inspiration for your gift and honor your intention to the best of our ability when it is received.

I have included PROLIFE Across AMERICA (EIN: 41-1654040), Minneapolis, Minnesota, as a beneficiary of my estate plans as follows:

☐ Bequest in a Will or Trust*

☐ Retirement Plan*

☐ Life Insurance Policy*

☐ Investment or Bank Account*

☐ Donor Advised Fund*

☐ Other Property or Provision*: _____

I estimate the current value of this gift to be \$_____ (confidential).

**If you designated "PROLIFE Across AMERICA" as a beneficiary of a will or trust, please share/attach the date that the trust was executed, the name and contact information for the executor or attorney, and a copy of the page in your will or trust designating your gift. If you designated "PROLIFE Across AMERICA" as a beneficiary of an account or policy, please share/attach the custodian and account number or a recent statement.*

Executor, attorney, or other contact information:

I would like for my gift to be directed to:

☐ General support

☐ Other*: _____

**Restricted funds will be directed toward these programs as long as they are still executed by PROLIFE Across AMERICA at the time of the gift's realization. If the programs no longer exist, the gift will support PROLIFE Across AMERICA's greatest needs.*



PROLIFE
Across AMERICA®

☐ You may publish my name to motivate others to leave a future gift, as follows:

☐ I am open to sharing about my story and this gift with you and have provided my contact information below.

I understand that this Letter of Intent is not legally binding, is strictly confidential, and that I may choose to add, subtract, or revoke this gift at any time at my sole discretion. I will do my best to notify PROLIFE Across AMERICA of any significant changes as they occur.

PRINT NAME(S)

DATE(S) OF BIRTH

ADDRESS

CITY

STATE

ZIP

EMAIL

SIGNATURE

DATE

For questions about this
form or PROLIFE Across
AMERICA, please contact:

Angela Johnson
Associate Director
or

Mary Ann Kuharski
Executive Director

612-781-0410
info@prolifeacrossamerica.org



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We would love to hear about your story and what has inspired your gift.

Feel free to share with us or let us know what time of day is best to contact you by phone or email!

