

bequest notification form



Donor

Title _____ Name _____

Address _____

City _____ State _____ Zip _____

Date of Birth ____/____/____ Phone _____

Email Address _____

(Please notify us of changes in your address so we may stay in touch with you)

Executor

Title _____ Name _____

Address _____

City _____ State _____ Zip _____

Type of Bequest

I (we) have made provision the Children's Museum of Sonoma County (CMOSC) in my (our) estate planning to support the mission of playful exploration for children in the arts & sciences as follows:

- A stated gift in the amount of \$ _____
- I (we) have included CMOSC as a beneficiary of the asset indicated below:
 - Retirement plan(s):
 - Financial or investment account(s):
 - Life insurance policy(ies):
 - Other asset(s): _____
- A percentage of my (our) entire estate, for a percentage of _____%
Currently, this could result in a gift in the amount of \$ _____.
- A percentage of my (our) residual estate, for a percentage of _____%
Currently, this could result in a gift in the amount of \$ _____.
- I (we) have left my (our) entire estate for the benefit of the above named organization.
Currently, this could result in a gift in the amount of \$ _____.

I request the funds be used:

- where most needed by CMOSC
- for the Endowment of CMOSC

Date _____ Signature _____

This form is non-binding and does not constitute a legal promise of any future donation to the Children's Museum of Sonoma County. We understand that bequests are revocable and that your estate plans may change.

Please return this form to: Children's Museum of Sonoma County, P.O. Box 12323, Santa Rosa, CA 95406