



630 W. Dekora Street Saukville, WI 53080
www.ozaukeehumane.org

Life-Saving through Life Savings: Statement of Intent

I/We, _____ (names) plan to provide future support to the Wisconsin Humane Society Ozaukee Campus (also known as the Ozaukee Humane Society) through (check all that apply):

Will/Bequest Insurance Policy Charitable Gift Annuity 401K/IRA

Charitable Trust Real Estate or Property Other: _____

The approximate/estimated value of my planned gift is \$ _____.

Recognition options (please check one):

- To encourage the support of others, I/we accept the Wisconsin Humane Society Ozaukee Campus' invitation to be recognized as a member of Buster's Legacy Club.
- I/We would like our intentions to remain anonymous during my/our lifetime; however when my/our gift is realized, I/we would accept recognition of our gift.
- I/We would like this gift to remain anonymous in perpetuity.



Buster, who inspired this Club!

While the completion of this statement does not obligate you to give, it does help the shelter plan for future programs to help animals. We hope that any substantial change of intent would be communicated to us promptly. All of the information provided will be maintained confidentially and within the scope of your wishes, as indicated on this form.

If recognition is acceptable to you, please include a photo of yourself and/or your animal companion and indicate below how your name(s) should appear:

Address: _____

City, State, Zip: _____

Business Phone: _____ Home phone: _____

Signature(s): _____

Date: _____