

"The greatest legacy anyone can leave behind is to positively impact the lives of others." Emeasoba George

"The true meaning of life is to plant trees, under whose shade you do not expect to sit." Nelson Henderson

ACVS Foundation Planned Giving Form

Thank you for your support of the American College of Veterinary Surgeons (ACVS) Foundation. Your pledge guarantees that the ACVS Foundation will be able to continue its mission to improve the surgical care and treatment of all animals though education and research.

I/we would like to crea plans.	ate a legacy for veterinary s	urgery and have included the ACVS Founda	ation in my/our estate	
Donor(s) name(s):		Email:		
Mailing address:				
		Telephone:		
The ACVS Foun	ndation may include my/our	name(s) with other donors in publications of	or donor listings.	
I/we wish to re	emain anonymous.			
Please indicate your pl	lanned gift:			
Bequest	Life insurance	Retirement plan beneficiary	Stock gift	
Other				
Understanding that va approximately:	lues are subject to change,	at this time, I/we estimate the value of my	/our gift to be	
Contact information of	f executor or attorney:			
Name:		Email:		
Mailing address:				
		Telephone:		
Donor signature:		Date:		
Donor signature:		Date:		
Please return the comp	pleted form to the ACVS Fou	ndation office.		
This document does no	ot bind you or your estate. E	By signing this form, you are simply acknowl	edging your current plans	

to benefit the ACVS Foundation in the future and giving guidance as to your wishes. Details of this form will be kept confidential.