



Legacy Gift Information

Your information will be kept strictly confidential with the Oncology Nursing Foundation. Please feel free to tell us only what you are comfortable sharing.

- I/We would like to support the mission and vision of the Oncology Nursing Foundation with a legacy gift.

Date (mm/dd/year) _____ Name _____ Signature _____

Date (mm/dd/year) _____ Name _____ Signature _____

I/We have: (please check all that apply below)

Bequest

- Included a bequest for the Oncology Nursing Foundation in my/our will or living trust.

I/We anticipate that the approximate value of my/our bequest(s) will be \$ _____

Beneficiary Designation

- Included the Oncology Nursing Foundation as a beneficiary of an asset.

The asset of which the Oncology Nursing Foundation is beneficiary of is a: *(check all that apply)*

- Retirement asset(s) (e.g., IRA, 401k, 403b, pension, etc.)
 Life insurance policy(ies)
 Other asset(s)

I/We anticipate that the approximate value of my/our beneficiary designation(s) will be \$ _____

Irrevocable Beneficiary Designation

- Included the Oncology Nursing Foundation as a beneficiary of a charitable trust.

I/We anticipate that the approximate value of my/our remainder trust(s) will be \$ _____

Legacy Gift Information

Name(s)

First _____ M.I. ____ Last _____

First _____ M.I. ____ Last _____

Title _____

Title _____

Address _____

Address _____

City _____ State _____ Zip _____

City _____ State _____ Zip _____

Telephone (_____) _____

Telephone (_____) _____

Email (optional) _____

Email (optional) _____

Name of Executor or Trustee

First _____ M.I. ____ Last _____

Title _____

Address _____

City _____ State _____ Zip _____

Telephone (_____) _____

Email (optional) _____

Please use this space for any additional notes you'd like to share:

This form is non-binding and does not constitute a legal promise of any future donation to the Oncology Nursing Foundation. We understand that gifts of this type are revocable (unless irrevocable) and that your estate plans may change. Thank you for your thoughtful support.

Please return the completed information above and return to:

Oncology Nursing Foundation
125 Enterprise Drive
Pittsburgh, PA 15275



Or, you may email it to info@onfgivesback.org

Please feel free to contact us at 866-257-4667 Option 4. We are happy to discuss your ideas and wishes, as well as answer any questions you may have.