



The Hermitage No-Kill Cat Shelter
Arizona's First No-Kill, No-Cage Cat Adoption & Sanctuary
*Advocating for animal rights and ending needless euthanasia of at-risk felines
through protection, adoption and sanctuary.*

Standard Bequest Form

PERSONAL INFORMATION

Name(s): _____
Mailing Address: _____
City/State: _____ Zip Code: _____
Day Phone: _____ Cell Phone: _____
Email Address: _____
Date of Birth: _____

BEQUEST INFORMATION

I have made provisions for The Hermitage No-Kill Cat Shelter in my estate plan as follows:

Bequest Directly from Will

(Please provide copy of page from your will detailing bequest information)

Amount: \$ _____
Executor Name: _____
Day Phone: _____

Life Insurance Policy

Amount: \$ _____
Company Name: _____ Policy #: _____
Contact Name: _____ Daytime Phone: _____

Trust Naming The Hermitage No-Kill Cat Shelter as Beneficiary

Amount: \$ _____
Type of Trust: _____
Name(s) & DOB of Primary Income Beneficiaries: _____
Any Special Conditions of the Trust? _____

The Hermitage No-Kill Cat Shelter is a non-profit organization. Donations made are fully deductible to the extent allowed under 501(c) 3 of the IRS code. The Hermitage is completely supported by private donations. We shelter the homeless, feed the hungry, find new homes and give love to so many. No goods or services were exchanged for this, or any, donation made to The Hermitage.



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Bank Account

(Payable upon death designation)

Amount: \$ _____

Name of Bank: _____

Contact Name: _____ Daytime Phone #: _____

Additional Information: _____

Investment Account

(Transfer upon death designation)

Amount: \$ _____

Investment Name: _____ Policy #: _____

Contact Name: _____ Daytime Phone #: _____

Additional Information: _____

IRA Account

(Beneficiary designation)

Amount: \$ _____

Company Name: _____ Policy #: _____

Contact Name: _____ Daytime Phone #: _____

Additional Information: _____

Total Amount: \$ _____

Attachments which further describe the above provisions are included. In addition to the section of the Will, Trust or Insurance Policy in which The Hermitage No-Kill Cat Shelter is mentioned. In the event of unforeseen circumstances which might require changes in the above, I agree to notify The Hermitage No-Kill Cat Shelter of any such changes.

Signature: _____

Date: _____

Please Print Name: _____

FOR OFFICE USE ONLY

Received By: _____ Date Received: _____

Other: _____

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