

thesecondopinion

Providing Clarity, Compassion & Hope since 1969

Every Second Opinion Counts

Bequest Intention Form

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

1. I/We have included The Second Opinion as a beneficiary in my/our:
 - ☐ Will/Living Trust
 - ☐ Retirement Plan
 - ☐ Life Insurance Policy
 - ☐ Other: _____
2. The estimated value of my/our gift is:
 - ☐ Specific amount: \$ _____
 - ☐ Percentage of estate: _____% (Estimated value: \$ _____)
 - ☐ I wish to keep the value private
3. Gift Designation:
 - ☐ Unrestricted use
 - ☐ Specific purpose: _____
4. Recognition Preferences:
 - ☐ Please list my/our name(s) as: _____
 - ☐ I/We wish to remain anonymous
5. Additional Information:

6. Executor/Trustee Information:
Name: _____
Address: _____
Phone: _____ Email: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

Thank you for your generous support. We understand this form is non-binding and does not create a legal obligation. Please notify us of any changes to your plans.

Bequest language for use in will or trust.

I/We bequeath the sum of (dollar amount) or (percentage of estate) to Thesecondopinion, a non-profit corporation located at 1200 Gough Street, Suite #500, San Francisco, CA 94109, with EIN #94-1696341, to used where most needed, or list specific purpose here.