

## Membership PRF's Leadership by Legacy Society includes invitations to special events plus recognition in our Annual Report

## **Planned Giving Commitment Form**

I have included The Progeria Research Foundation in my estate plans in recognition of my strong commitment to leave a legacy.

Name:	Email:
Address:	Phone:
☐ I wish to be recognized in the Leadership☐ I wish to remain anonymous.	b by Legacy Society as follows:
Type of Planned Gift: (optional)	
□ Will	□ Trust
☐ Retirement Plan Beneficiary	☐ Life Insurance Policy Beneficiary
and its Board of Directors to direct funds  Restricted to a specific purpose: (please Please provide any other details you	kibility to The Progeria Research Foundation to where the need is greatest.  identify) wish to share (including amount of bequest and nent):
·	fidence and used for internal planning purposes only.)
Signature:	Date:

Please return this form and any attachments to: The Progeria Research Foundation, P.O. Box 3453 Peabody, MA 01961-3453 Attn: Planned Giving Officer. Thank you for your continued commitment.

Completion of this form is a notification of intent only and not intended to be legally binding. Please discuss your planned giving intentions with your professional financial and legal advisors. The Progeria Research Foundation is a tax-exempt nonprofit organization recognized by section 501(c)(3) of the Internal Revenue Code ID# 04-3460220.