


LIVING LEGACY SOCIETY



*A seed planted today...
brings beautiful blossoms tomorrow.*

AABGU GIFT ANNUITY – REQUEST FOR INFORMATION

Please fill out this form completely.

This information will be treated with complete confidentiality and you are under no obligation to participate in the program.

If you have any questions, please contact your regional office or Sarah Allen, AABGU's director of donor affairs, at (800) 962-2248 ext. 1400 or e-mail plannedgiving@aabgu.org

TYPE OF ANNUITY (please select single life or two lives):

SINGLE LIFE (payments for life to benefit one person)

FULL LEGAL NAME DOB (MM/DD/YYYY) – Mandatory

TWO LIVES (payments first benefit two persons, and then survivor for life)

FULL LEGAL NAME #1 DOB (MM/DD/YYYY) – Mandatory

FULL LEGAL NAME #2 DOB (MM/DD/YYYY) – Mandatory

Relationship to each other: _____

PROPOSED ANNUITY AMOUNT (\$10,000 minimum)

\$50,000 \$25,000 \$18,000 \$10,000 Other \$ _____

Cash: _____ or Securities: _____ (Cost Basis: _____)

Send the AABGU CGA Illustration to:

NAME

ADDRESS

CITY STATE ZIP CODE

PHONE – Please indicate best time to call E-MAIL

Please send me/us information about the following planned gifts:

Bequests Gifts of Life Insurance Gifts of Real Estate

Gifts of a Pension, Retirement Plan or IRA Charitable Remainder Trusts