

BOTANICAL SOCIETY OF AMERICA'S LEGACY SOCIETY

As evidence of my/our desire to provide a legacy of support to the Botanical Society of America, I/we hereby inform you that I/we intend to leave a gift in my/our will. I/we understand that this commitment is revocable and can be modified by me/us at any time.

Name(s)			
Address	City	State	Zip
() Phone	() Fax	E-Mail	
It is my/our intent to leave a legacy for the benefit of the Botanical Society of America through: [*] A Bequest in My Will			
□ I hereby give and bequeath \$ to the Botanical Society of America. (<i>optional</i>)			
 I hereby give, devise, and bequeath (the residue) or (% of the residue) of my estate to the Botanical Society of America. (<i>optional</i>) A Living Trust The trustee shall distribute (\$) or (% of the remaining trust balance of the trust property (<i>optional</i>)) to the Botanical Society of America. (<i>optional</i>) 			
Please enroll me/us in the Botanical Society of America's Legacy Society under the following conditions (if not checked, no enrollment will occur):			
Feel free to publish my/our name(s) among your honor lists of Legacy Society members as a motivation for others to leave future gifts to benefit the Botanical Society of America			
Do not publish my/our Legacy Society membership.			
Please prepare a Legacy Society certificate in recognition of my/our gift. I/we would prefer a:			

Date

Donor Signature

Donor Signature

*We hope that you will share the approximate amount of your gift with us so that the Society will know of your generosity and be able to recognize you appropriately. It is also helpful for us to have on file any supporting documentation that you may be able to share with us. You may attach documentation to this form.

If you would like to explore making a gift to the Botanical Society of America using other assets, please contact: Heather Cacanindin, Executive Director, Botanical Society of America 4344 Shaw Blvd., St. Louis, MO 63110 Phone 314-577-9566 Fax 314-558-9184 hcacanindin@botany.org