

## Planned Gift Letter of Intent

As an investment in Colorado Health Network's future, and in consideration of the gifts of others for the same purpose, I/we intend and expect to establish an estate gift naming Colorado Health Network Inc., DBA Colorado AIDS Project as an ultimate beneficiary.

I/We have made provisions for the following planned gift(s) to Colorado Health Network Inc.:

- |  |  |
|--|--|
| <input type="checkbox"/> Bequest in a Will             | <input type="checkbox"/> Life Insurance          |
| <input type="checkbox"/> Charitable Gift Annuity       | <input type="checkbox"/> Charitable Trust        |
| <input type="checkbox"/> Individual Retirement Account | <input type="checkbox"/> Other Provisions: _____ |

The ultimate intended purpose of my/our gift:

- Unrestricted
- Endowment, for the following purpose \_\_\_\_\_
- Other \_\_\_\_\_

- I/We wish to keep this planned gift anonymous at this time.
- I/We wish to be included in the Julian Rush Society

The approximate current value of my/our estate gift is: \_\_\_\_\_

\_\_\_\_\_  
Signature(s)

\_\_\_\_\_  
Date(s) of Birth

\_\_\_\_\_  
Please print your name (s)

This Planned Gift Letter of Intent shall not constitute a legal binding obligation and shall not be legally binding in any way on my estate or me. While I/we consider that I/we have made a moral obligation to make this gift, I/we reserve the right to adjust or cancel it in the event of unforeseen circumstances.

Colorado Health Network Inc., is a 501(C)3 nonprofit organization, Federal tax ID # 84-0961159