



for the love of pets Charitable Gift Annuity

Annuitant Information:

Name(s) of Donor(s): _____

First Annuitant Information:

Name: _____

Address: _____

Date of Birth*: _____

SSN: _____

Mailing Address: _____

Second Annuitant Information:

Name: _____

Address: _____

Date of Birth*: _____

SSN: _____

Mailing Address: _____

Payment Instructions: ___ Check ___ Direct Deposit

Cash Donated: _____

Securities Donated: _____

Cost basis of Securities: _____

I/we have owned these securities for a period longer than one year. ___yes ___no

NOTE: Donation of securities owned less than one year may result in less beneficial tax consequences to the donor(s).

Type of Annuity (Check One): ___ Life ___ Joint

Payments: ___ Start NOW ___ Defer for: ___ years, until (month/year) _____.

Annuity Payments to be made (check one): ___ Annually ___ Semi-Annually

Date: _____

Annuitant's Signature: _____

Date: _____

Annuitant's Signature: _____

* Proof of birth date of annuitant may be in the form of a copy of a birth certificate, passport, or driver's license.

For Internal Use

Date of Gift: _____ Type of Gift: _____ (Describe) _____

Amount of Gift: _____

Purpose of Gift: _____

Charitable Deduction: _____

Annuity Rate: _____

Annuity Amount: _____

First Payment Amount: _____

Date of First Payment: _____

Date of Disclosure Sent: _____

Comments: _____