



How to remember FACE in your estate plan:

If you are considering including FACE in your estate planning documents, we believe that the following simple language can be used as a guidepost for discussions with your attorney. Such gifts can be made to distribute a percentage of one's estate, a set dollar amount from one's estate, or the entire estate. In the event that an individual passes on without any heirs to inherit from their estate (which could be many years in the future), FACE can still be included among the charities that can receive an ultimate distribution from one's estate. Below are two examples of such sample language, which can be included in one's estate planning documents:

For gifts of a percentage, a flat dollar amount, or the balance of an estate, consider including the following:

I give, devise and bequeath to The FOUNDATION FOR ANIMAL CARE AND EDUCATION ("FACE"), located in San Diego County, CA at 10505 Sorrento Valley Road, Suite #175, San Diego, CA 92121, and which is a charitable organization duly organized and operated under California with a Federal Tax Identification Number of 20-5333261, the following:

optional language A: _____% of the rest and residue of my estate;

optional language B: the entire residue of my estate"; or

optional language C: the sum of \$_____ from the residue of my estate

For those situations in which an individual dies without any issue or heirs to inherit under such individual's testamentary documents, the following clause can be used to provide that FACE may receive all or a portion of the ultimate distribution of assets from the estate. This is sometimes referred to as the "Disaster Clause" or "Contingent Remainder" Clause. The following is an example of such a clause that can be included in one's estate planning documents:

In the event that (a) [my spouse, children, sibling, heirs] do not survive me, or shall die during the administration of my estate, within ____ days from the date of my death, or as a result of a common disaster, or (b) at any time in the future there is no individual to properly receive the assets subject to this estate administration, then I direct that my estate be distributed to The FOUNDATION FOR ANIMAL CARE AND EDUCATION ("FACE"), located in San Diego County, CA at 10505 Sorrento Valley Road, Suite #175, San Diego, CA 92121, and which is a charitable organization duly organized and operated under California with a Federal Tax Identification Number of 20-5333261.

If you wish to have your bequest applied to a specific program, simply add "...for the benefit of the Save-A-Life Program" to the language above. We highly suggest you consult an attorney or financial planner when preparing legal documents. Once you have added FACE to your will, please notify our offices so that we can thank you!

FACE Foundation Tax ID: 20-5333261
10505 Sorrento Valley Road, Unit 175 | San Diego, CA 92121
T 858.450.3223 | F 858.457.3223 | www.face4pets.org
Christine Spencer | Director of Development | christine@face4pets.org | 619-300-2028



Thank you for your intention to include FACE Foundation in your estate plan. We are so grateful to you for making FACE a part of your legacy. Please complete this form with as much detail as you feel comfortable sharing with us. Any information about your gift will remain confidential and does not create a binding, legal obligation. When finished, please send the form in the enclosed envelope.

Recognition of Your Gift

For recognition purposes, please list my/our name(s) as follows:

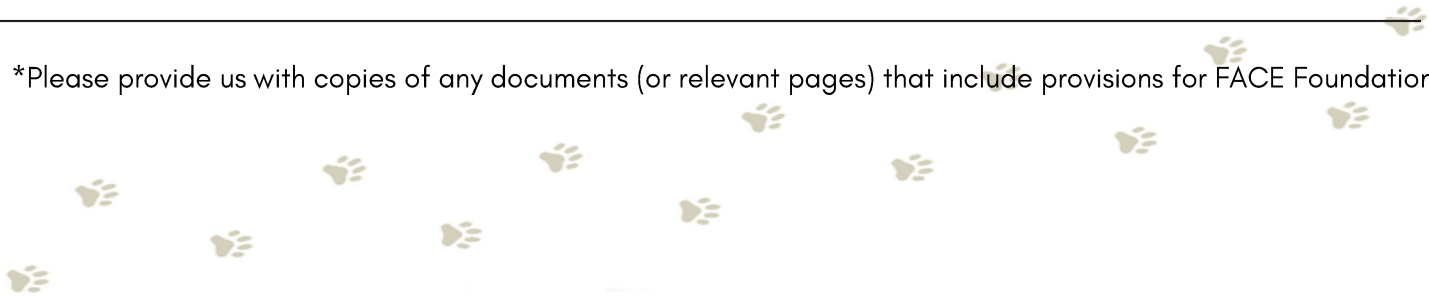
Please do not include my/our name in any public listings of donors

Gift Details – Briefly describe allocation, designation, and how your gift should be used:

Description	Amount or Percentage	Estimated Amount of Gift to FACE Foundation
<input type="checkbox"/> Will or Trust with a sum of	_____	_____
<input type="checkbox"/> Charitable Gift Annuity in the amount of	_____	_____
<input type="checkbox"/> Charitable Remainder Trust in the amount of	_____	_____
<input type="checkbox"/> Remainder of Retirement Fund/IRA with a total current value of	_____	_____
<input type="checkbox"/> Life Insurance Policy with a policy value at maturity of	_____	_____
<input type="checkbox"/> Other item or Asset in the amount of	_____	_____
Please describe (Private collections, real estate, securities, etc.)		

Beneficiary – If FACE Foundation is only a contingent beneficiary, please explain conditions.

*Please provide us with copies of any documents (or relevant pages) that include provisions for FACE Foundation.





Contact information

Information, Contacts and Relationships You Want Us to Know (family, attorney, etc.)

Name and Address

Phone and/or Email and Relationship

This Declaration of Intent

- New Intention - this is a new bequest intention to FACE Foundation
- Update to Intention - this is an update to a previously recorded intention to FACE Foundation

Donor Name _____ Date _____

Signature _____

Street Address _____

City, State, Zip _____

Email and Phone Number _____

Donor Name _____ Date _____

Signature _____

Street Address _____

City, State, Zip _____

Email and Phone Number _____



Legacy Society

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