



“I did not find the world desolate when I entered it,” said the old man, “and as my ancestors planted for me before I was born, so do I plant for those who will come after me.” excerpt from a Talmudic story.

The O’Connor Hospital Heritage Society Enrollment and Intent Form *

The O’Connor Hospital Heritage Society honors those donors who have made provisions for O’Connor Hospital Foundation in their estate plans or have established a planned gift. Their thoughtful gifts are the Hospital’s bridge to the future.

- I /We have made a provision to support O’Connor Hospital Foundation through my/our estate plan.
- I/We qualify for membership in the O’Connor Heritage Society by means of:
 - A bequest in my will or living trust
 - A charitable trust
 - A charitable gift annuity
 - A life insurance beneficiary designation
 - A gift of a remainder interest in a residence
 - Other means
 - Please call me so we can discuss
- I/We would like more information.
- I/We give permission for my name to be publicly recognized as a member of the O’Connor Heritage Society.
- I/We prefer to remain anonymous.
Do not list my name in the O’Connor Hospital Heritage Society roster.

Name: _____
 Recognition names: _____
 Address: _____
 City/State/Zip: _____
 Phone: _____ Email: _____

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*Letters of Intent are not legal documents and can be changed or revoked at any time.