Friends of Hopewell House

In celebration of the critical role Friends of Hopewell House (FHH) plays in our community, I/we are pleased to have included FHH in our estate plans. I/We understand this document is not legally binding and that I/we may choose to add, subtract, or revoke this intention at any time. We share this information to help FHH build strength and sustainability.

Name Name(s) as you would like to be recognized		
Address		
Phone(s)	Email(s)	_
My/our intention is to support Frier	nds of Hopewell House as a beneficiary of my/our:	
	 Donor Advised Fund Charitable Remainder Trust 	
Life Insurance Policy Other	Charitable Gift Annuity	
% of my/our estate (this amou	in your donor list to inspire others to leave a legacy. t is kept strictly confidential.	
 Donor Signature	 Donor Signature	
Date of birth:	Date of birth:	
Date:	Date:	
	Capitol Highway, Portland, OR 97239 ns? Contact inquires@Fhhpdx.org	

www.friendsofhopewellhousepdx.org * IRS Tax ID: 84-3380179

THANK YOU!