

**Air Force Museum Foundation, Inc.
Bequest Form**

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Date of Birth: _____

1. In my estate plan, I have made provision for the Air Force Museum Foundation, Inc. as follows:

A. Bequest in my will \$ _____

B. Life insurance policy \$ _____

C. Trust naming Air Force Museum Foundation, Inc. as the beneficiary (please specify type of trust, the date(s) of birth of primary income beneficiaries, and any conditions):

D. Charitable Gift Annuity \$ _____

E. Other (please describe) _____

2. I/We would like my/our estate gift to be used for the following purpose:

Undesignated for area with greatest need

Designated for: _____

3. You may include my/our names in public recognition as a member of the Legacy Society on the Air Force Museum Foundation website and Annual Report.

Please print how you would like your name(s) to appear: _____

I/We wish to be anonymous.

4. In the event of unforeseen circumstances which might require change(s) to the above information, I agree to notify the Air Force Museum Foundation, Inc. of such change(s).

Signature

Date

Thank you for making a lasting contribution to the mission of the National Museum of the United States Air Force through your planned gift to the Air Force Museum Foundation, Inc.

Neither the Foundation nor its employees may give legal, tax or accounting advice. Counsel should be contacted prior to drafting or amending any instrument. Please review your estate plan with your attorney and your financial advisor.

Please return this form via email at Friends@afmuseum.com or mail to:

Air Force Museum Foundation, Inc.

P.O. Box 1903

1100 Spaatz Street

WPAFB, OH 45433-1903

