**CONFIDENTIAL LETTER OF INTENT**

Please complete and mail to **AATG, 112 Haddontowne Ct #104. Cherry Hill, NJ 08034**

*All information provided below will be treated strictly confidentially, will be used for AATG internal purposes only, and is not considered to be a legal or financial obligation.*

* My/our name/s may be published as a donating member upon receipt of gift.
* I/we prefer to remain anonymous.

Print Name/s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signatures: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: State: \_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_

Telephone: Email:

As an indication of my/our support for AATG or one of its programs, I/we am pleased to confirm that I/we have made a provision as follows (select all that apply):

* Bequest in my/our Will
* Provision in my/our Revocable Living Trust
* Establishment of a Charitable Remainder Trust
* Establishment of a Charitable Gift Annuity
* Beneficiary Designation in my/our Qualified Retirement Plan or Commercial Annuity
* Life Insurance Gift
* Endowment Fund (Please list the fund:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)
* Other

Description of the provision/s and what I would like my support to accomplish (feel free to attach letter of explanation if the space provided does not suffice):

 I/we conservatively estimate the current value of my/our provision to be approximately

$ . AATG recognizes that values are subject to change. This information will be used only to help AATG project possible future financial support.

I/we worked with the following advisor to establish the gift:

Name: Email:
Company/Address:

City: State: Zip:

Please mail a physical copy and a copy to mike@aatg.org
Thank you for your generous support!