



## PLEDGE FORM - CONFIDENTIAL

The Leave a Positive Legacy Society honours those people who have made a positive difference by leaving a charitable donation or gift to Toronto People with AIDS Foundation (PWA) in their Will.

I, \_\_\_\_\_, commit to completing my estate planning, including a gift to Toronto People with AIDS Foundation:

Yes  No  Already completed

We appreciate your commitment to PWA. May we get back to you in a month or two to see how your planning process is going and to confirm you as a Founding Member of the Leave a Positive Legacy Society?

Yes  No

Please contact me via phone at \_\_\_\_\_ or email at \_\_\_\_\_ because:

- I am considering other ways to support PWA such as a gift of securities.  
 I have questions or comments to share.

If you have already left a gift to PWA in your Will, we will be delighted to add you as a Founding Member of the Leave a Positive Legacy Society and, with your permission, recognize your thoughtful gesture (on the web site and donor listings).

I am proud to be leaving a positive legacy and be recognized as a Founding Member of the Leave a Positive Legacy Society. Please list my name as follows: \_\_\_\_\_

**OR**

I am proud to be leaving a positive legacy and joining the Leave a Positive Legacy Society but I prefer to remain anonymous.

Optional:

I have left a specific gift of \$ \_\_\_\_\_ **OR**  I have left a residual gift of \_\_\_\_\_ % of my estate

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Thank you for leaving a positive legacy!**

Contact: Robb Walker at 416-506-1400, 240 or email at [rwalker@pwatoronto.org](mailto:rwalker@pwatoronto.org)

If you have confirmed your gift with us today, we will send you a confirmation to ensure we have reflected your wishes and your information accurately.

DONOR NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ EMAIL: \_\_\_\_\_

CITY: \_\_\_\_\_ PROV: \_\_\_\_\_ PC: \_\_\_\_\_

