



My Bequest Intention

My bequest will be:

By leaving CareFlight Ltd a bequest in your Will, you're showing your commitment and support to providing the highest standard of rapid response critical care to the ill and injured, both now and in the future.

If it's your intention to provide CareFlight with a bequest, please complete this confidential form and return it to us in the envelope provided.

This is not a legal document. It simply serves as a way of us understanding and recognising your generosity. If you wish to provide us with the details of your bequest plans, we thank you.

This information helps us in planning for the future.

- D I have already included CareFlight in my Will.
- D I intend to include CareFlight in my Will and shall be renewing my Will in the next _____ months.
- D I am considering including CareFlight in my Will and would like to further discuss my bequest intentions with someone from CareFlight.
- D I would like to become a Bequest Commander .
- D I do not intend to include CareFlight in my Will.

- A percentage of my estate D
- The residue of my estate after other bequests are made D
- A specific dollar amount D
- A specific item of value D
(Please tell us about the item)

The intended approximate amount of my bequest is:

\$ _____ OR _____ % of my estate.

Please use my gift in the areas most needed D

Please direct my gift specifically to the following area(s): D

Information about you:

Full Name:

Spouse's Full Name:

Date of Birth:

Spouse's Date of Birth:

____/____/____

____/____/____

Home Address:

CareFlight is a not for profit emergency medical retrieval organisation. Our mission is to save lives, speed recovery and serve the community by providing the highest standard of rapid response critical care.

CareFlight Ltd. ABN 18210 132 023

www.careflight.org

Please return your completed form to:

Careflight
GPO BOX 9829
In Your Capital City

Fax to: 1300 788 786

Solicitor's Name:

Phone:

[Home] [Mobile]

Email:

Donor Signature: Date:

Thank you for naming CareFlight Ltd in your Will. We appreciate and want to celebrate your generosity. It is very important you

tell us whether or not we are able to recognise you by checking one of the following:

D I give permission to CareFlight to list my name as a planned gift donor in any recognition materials.

D I want my bequest to remain anonymous.

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Suggested Wording

General or Pecuniary Bequest: I GIVE to CareFlight Limited, whose head office is at 4 Barden St, Northmead NSW, the whole OR (insert percentage) of my estate. I declare that the receipt of the Chief Executive Officer or other proper officer of CareFlight Limited will be a complete discharge for this bequest and my trustee will not be bound to see the application of the bequest.

Residual Bequest: I GIVE to CareFlight Limited, whose head office is at 4 Barden St, Northmead NSW, the residue of my estate. I declare that the receipt of the Chief Executive Officer or other proper officer of CareFlight Limited will be a complete discharge for this bequest and my trustee will not be bound to see the application of the bequest.

Specific Bequest: I GIVE to CareFlight Limited, whose head office is at 4 Barden St, Northmead NSW, (insert specific item to be given) OR the sum of (insert specific amount to be given) for its general purposes. I declare that the receipt of the Chief Executive Officer or other proper officer of CareFlight Limited will be a complete discharge for this bequest and my trustee will not be bound to see the application of the bequest.