

GENESYS HEALTH FOUNDATION  
Tax-exempt ID #38-3591148

Arbor Society  
Statement of Bequest Intention

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I/We have included Genesys Health Foundation in my/our will, revocable trust, retirement plan or other estate plan.

The estimated value of this gift to Genesys is \$\_\_\_\_\_.  
I/we understand this estimate does not constitute a legally binding agreement.

My/our gift is designated for \_\_\_\_\_.

\_\_\_\_ I/we have enclosed the relevant portion of my/our estate plan that pertains to our gift for Genesys (optional).

\_\_\_\_\_  
Signature(s)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name(s) – this is how your name will be printed on the donor wall

\_\_\_\_ Yes, please enroll me/us in the Arbor Society and I/we approve public recognition of my/our gift. My/our names will be listed on the donor wall in the hospital atrium as well as in annual reports.

\_\_\_\_ Yes, please enroll me/us in the Arbor Society however, I/we do not want to be publicly recognized for this gift.

\_\_\_\_ No, please do not enroll me in the Arbor Society at this time.

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Please return to:      Genesys Health Foundation  
                                 One Genesys Parkway  
                                 Grand Blanc, MI 48439  
                                 810-606-6020