

HEIRLOOM CIRCLE | CONFIDENTIAL DECLARATION OF INTENT

*Thank you for making gardening part of your legacy by
joining our honor roll of Heirloom Circle members.*

1. In what form(s) do you intend to make a legacy gift to MSHS?

- Will
- Trust
- Retirement Plan
- Life Insurance Policy
- IRA Distributions
- Trusts & Annuities
- Gifts of Stock
- Other: _____

2. May we publicly recognize your Heirloom Circle membership?

- Yes
- No, I/we wish to remain anonymous.

3. This is an expression of my/our current plans. It is not a legal obligation binding on me/us or my/our estate and may be modified or revoked at any time.

Signature: _____ Date: _____

Signature: _____ Date: _____

Name(s): _____

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____

QUESTIONS?

Diane Duvall

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*In designating MSHS as a beneficiary, please use our full name:
Minnesota State Horticultural Society. Our tax ID number is **410635199.***