NEW HORIZONS
Bold Futures. Unlimited Possibilities.

YES! I WANT TO SUPPORT NEW HORIZONS BY MAKING A PLANNED GIFT.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____Email: _____

For recognition please list my name as: _____

□ I wish to remain anonymous.

The source of my gift is: (please check all that apply)

□ Will	**□ Life Insurance Policy**
□ Retirement Fund	**□ Annuity Contract**
□ Securities	**□ Trust/Unitrust**
□ Personal Property	**□ Cash**
□ Real Estate	**□ Pooled Income Fund**

□ Donor Advised Fund (name of institution :_____)

My gift is: □ revocable □ irrevocable

Donor Signature: _____

New Horizons Representative Signature:_____

Date: _____

For further details, contact Melissa Puls, Chief Development Officer, at

(818) 322-4639 or mpuls@newhorizons-sfv.org

New Horizons 15725 Parthenia Street, North Hills, Ca 91343
Phone 818-894-9301 Fax 818-891-3267
www.newhorizons-sfv.org/plannedgifts
Federal Tax ID: 95-1862084

This side to be completed by donor's legal counsel.

COMPLETE LEGAL NAME OF DONOR(S):

_____

_____

NAME & ADDRESS OF LEGAL COUNSEL

_____

GIFT DETAILS: (please have your legal counsel describe the details of your planned gift and attach any necessary documentation.)

_____

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OFFICE USE ONLY:

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