

Welcome to the Milwaukee PBS Legacy Society. The steps you've taken now will ensure a continued vibrant impact on the communities we serve for future generations. Thank you!

Please complete the information below so that we may learn a little more about your estate plans and so we may recognize you appropriately at Milwaukee PBS special functions and in published reports.

Name:	
Address:	
City, State, ZIP Code:	
Telephone:	_ Email:

Choose one:

- Milwaukee PBS may include my (and, if applicable, my spouse's) name in Legacy Society listings. (Neither amount nor designation, if provided, will be included in the listing)
- □ I am honored to be included in the Milwaukee PBS Legacy Society; however I prefer to remain anonymous. Please do not include my/our name in Legacy Society listings.

Please share with us, in confidence, more about your estate provision for Milwaukee PBS. The following information is <u>optional</u>:

I have named Milwaukee PBS as a beneficiary of my/our:

□ Will/Trust

Charitable Remainder Trust

- □ IRA or Retirement Plan
- □ Life Insurance Policy

Other: _____

This provision is stated as:

- □ Unrestricted (General Operations)
- Designated for: _____