

Please help us ensure your legacy and intent are honored by providing the following contact information.

6. Will or Trust: Executor(s) or Trustee(s)

Contact Name: _____

Address: _____

Phone: _____ Email: _____

Life Insurance: Policy Owner(s) or Administrator(s)

Contact Name: _____

Address: _____

Phone: _____ Email: _____

Retirement Asset: Asset Manager(s)

Contact Name: _____

Address: _____

Phone: _____ Email: _____

Other Information, Contacts or Relationships you would like for us to know about (family, attorney, etc.):

DONOR INFORMATION

_____/_____/_____
Donor (*printed*) DOB

Donor Signature Date

_____/_____/_____
Donor (*printed*) DOB

Donor Signature Date

Primary Mailing Address: _____

Preferred Phone: _____ Email: _____

Please send this form, together with copies of all relevant supporting documents you would like to share to:

Delta Waterfowl Foundation (U.S. HQ)
Attn: Whittlee LaMontagne
1412 Basin Avenue
Bismarck, ND 58504
1-888-987-3695
EIN: 53-025796

Delta Waterfowl Foundation (CAD HQ)
Attn: Whittlee LaMontagne
RR1 Site 2 Box 2
Portage la Prairie, MB R1N 3A1
1-877-667-5656
CRO#: 119058998 RR0001

Delta Waterfowl Foundation is a U.S. qualified 501 (c) 3 Not-For-Profit Organization, and C.R.A. Registered Charitable Organization. We do not provide legal or tax advice. As with any decision involving your assets, charitable giving and estate planning, we strongly urge you seek the advice of qualified, professional counsel.