

Recognizing Your Gift • Bequest Confirmation Form

By remembering The Canadian Mental Health Association, Windsor-Essex County Branch (CMHA-WECB) in your estate planning, you can make a lasting investment in the lives of individuals living with a mental illness. A bequest can change the lives of so many individuals and families, by helping provide the crucial resources and supports needed to address mental illness and the stigma.

If you have made or intend to include a gift in your will to CMHA-WECB, please take a moment to complete this confidential form and return it to us.

Name:				
Spouse's Name:				
Address:				
City:				
Home Phone:	Work Phone:			
Email:				
I/We have already includ Essex County Branch in n	led the Canadiar			
I/We intend to include Ca County Branch in my/our		Health Associa	ation, Windsor-Essex	
_ The name(s) on any listing	gs should read as	s follows:		
_I wish to remain anonymo	us			
Donor's Signature:		D	ate:	
Joint Donor's Signature: _		Da	ate:	
This form can be returned by Or by mail to:	-	. ,		

Canadian Mental Health Association, Windsor-Essex County Branch 1400 Windsor Ave.

Windsor, ON N8X 3L9