HERITAGE CIRCLE

The Heritage Circle is an exclusive giving society of the Orlando Health Foundation recognizing the generous individuals who have chosen to include Orlando Health in their wills or other estate plans. These highly meaningful gifts help provide for the future advancement of our facilities, technology, and programs while ensuring a lasting legacy of life-saving care.

I am pleased to invest in the future of Orlando Health with a legacy gift.

Name	Spouse Name
Street Address	
City, State	Zip
y gift is in the form of	
☐ Will Bequest	☐ Family Foundation
□ Trust	□ Other:
ne estimated amount o	f my gift is:
lease note that estimated g	ift amount is based on current value, and subject to change.
I would	d like to designate my gift to support the following area(s):
In co	onsideration of my gift, I would like to be recognized as:
	Name

