



BEQUEST INTENTION

In recognition of my strong belief and confidence in debra of America, and to support the organization's mission to fund Epidermolysis Bullosa (EB) research and to provide services and programs to the EB community, I have made a gift by will or trust to debra of America. I have attached a copy of that portion of the will or trust that references my bequest or gift to debra of America. If I make any change to this provision or if the value of my bequest or gift changes substantially, I will notify debra of America of such change. I understand that all information listed below will be kept in confidence unless I authorize its release.

Name

Street, City, Zip

Estimated Current Value of Bequest

Date of Birth

Gift Designation(s)

Signature

Date

Please include my name in the debra of America Annual Report, as follows:

I prefer that my support remain anonymous.