

Sample Bequest Language for Hospice Niagara

Please include Hospice Niagara's Canadian Charitable Registration Number: # 89971 6294 RR0001

UNRESTRICTED BEQUESTS

Unrestricted Specific Bequest

I direct my Trustees to pay or transfer to HOSPICE NIAGARA for its general purposes the sum of \$ _____ and I declare that this sum shall be used by HOSPICE NIAGARA as to both capital and income for any purposes permitted by the by-laws of HOSPICE NIAGARA either immediately or at any time and in any amounts determined by the directors or other managing body. Nothing in this paragraph shall prohibit the investment of this sum or of any part of it which is not required for immediate expenditure. The receipt of the person purporting to be charged with the duties of the Treasurer of HOSPICE NIAGARA shall be a complete discharge to my Trustees.

Unrestricted Residual Bequest

After paying all of my just debts and expenses, I direct my Trustees to pay or transfer to HOSPICE NIAGARA for its general purposes the whole (or stated percentage) of the rest, residue and remainder of my estate and I declare that this sum shall be used by HOSPICE NIAGARA as to both capital and income for any purposes permitted by the by-laws of HOSPICE NIAGARA either immediately or at any time and in any amounts determined by the directors or other managing body. Nothing in this paragraph shall prohibit the investment of this sum or of any part of it which is not required for immediate expenditure. The receipt of the person purporting to be charged with the duties of the Treasurer of HOSPICE NIAGARA shall be a complete discharge to my Trustees.

