

## Sample Bequest Language

You and your advisors may use the following sample language to make a bequest (funds, stocks, insurance policy, property, etc.) to The Wallace Medical Concern:

### Legal Name and Address

The Wallace Medical Concern  
124 NE 181<sup>st</sup> Avenue, Suite 103  
Portland, OR 97230  
Tax ID: 93-0853709

### Percentage of Estate

"I give \_\_\_% of my estate to The Wallace Medical Concern, a non-profit corporation of the State of Oregon, to be used for general purposes as determined by the Board of Directors."

### Fixed Amount

"I give \$\_\_\_\_\_ (or describe the real or personal property) to The Wallace Medical Concern, a non-profit corporation of the State of Oregon, to be used for general purposes as determined by the Board of Directors."

### Residue of Estate (after probate costs and other expenses)

"I give to The Wallace Medical Concern, a non-profit corporation of the State of Oregon, all (or \_\_\_%) of the rest, residue and remainder of my estate, to be used for general purposes as determined by the Board of Directors."

### Contingent Bequest

"I give \$\_\_\_\_\_ to (name of beneficiary). If (name of beneficiary) does not survive me, this bequest will lapse and pass to The Wallace Medical Concern, a non-profit corporation of the State of Oregon, to be used for general purposes as determined by the Board of Directors."