## **Statement of Bequest Intention**



We

| (parish<br>that all | pleting this form, you signify you<br>, school, ministry or diocese) as a<br>bequest provisions are revocabl<br>eply grateful for your vision and § | a beneficiary of your es<br>e and that any intentic | tate. Your beneficia  | ry understands           | our estate |
|---------------------|---|---|-----------------------|--------------------------|------------|
| have i              | named   |   | (parish, s            | school, ministry or dioc | ese) as a  |
| benefic             | iary of: (Check as many as apply  | )   |                       |                          |            |
|                     | My Last Will and Testament  |   |                       |                          |            |
|                     | Charitable or Revocable Trust (Living Trust)  |   |                       |                          |            |
|                     | Retirement Account  |   |                       |                          |            |
|                     | Charitable Gift Annuity   |   |                       |                          |            |
|                     | Life Insurance Policy   |   |                       |                          |            |
|                     | Donor Advised Fund  |   |                       |                          |            |
|                     | A gift of cash, securities, real es<br>(please specify)   | ÷   |                       |                          |            |
| My pro              | vision (s) names  | (   | parish, school, minis | stry or diocese) as:     |            |
|                     | Primary Beneficiary   | Secondary Benefit                                   | ciary                 | Contingent Beneficia     | ary        |
| (Optioi             | nal) I estimate that the total valu   | e of my gift will be \$                             | •                     |                          |            |

If/when this gift is received, it is my wish that the organization use my gift for the following purpose:

- □ General Purposes/Area of Greatest Need
- Other \_\_\_\_\_

I understand that my commitment to leave \_\_\_\_\_\_(parish, school, ministry or diocese) a legacy gift through my estate entitles me to special recognition during events and in publications.

- □ Yes, the Diocese of Kansas City-St. Joseph may publish my name.
- □ I wish to remain anonymous and request that my name not be published in connection with my bequest intention.

Signature

Printed Name

Date

Signature

Printed Name

Date

To help us honor the intentions set forth above, we would greatly appreciate a copy of your Will or Trust (or appropriate sections thereof) for safekeeping in our confidential files. Thank you.