

# CONGREGATION OF DIVINE PROVIDENCE

SAN ANTONIO, TEXAS

## **LETTER OF INTENT FOR A PLANNED GIFT**

This statement is an expression of my intent to provide for the future of the Congregation of Divine Providence, Inc. through a planned or estate gift. I/We \_\_\_\_\_ have left a legacy through:

- |   |  |
|---|--|
| <input type="checkbox"/> Trust          | <input type="checkbox"/> Charitable Remainder    |
| <input type="checkbox"/> Will           | <input type="checkbox"/> Charitable Gift Annuity |
| <input type="checkbox"/> Life Insurance | <input type="checkbox"/> Other: _____            |
| <input type="checkbox"/> Real Estate    |  |

The estimated value of my/our gift is \$ \_\_\_\_\_.

### **Purpose**

It is my wish that the gift be used as follows:

At the discretion of the the Congregation of Divine Providence, Inc., where most needed to support its most compelling needs and opportunities

For the following existing fund(s) or purpose:

- |   |   |                                     |
|---|---|-------------------------------------|
| <input type="checkbox"/> Future Members   | <input type="checkbox"/> Ministries in Mexico | <input type="checkbox"/> Associates |
| <input type="checkbox"/> Providence Trust | <input type="checkbox"/> Moye Retreat Center  |                                     |

Special circumstances of my gift include: \_\_\_\_\_

I will provide you a copy of my will, policy, trust or beneficiary designation and appropriate contact information. Yes  No

I would like to work with the Congregation of Divine Providence to create a gift agreement that details the purpose of my gift. Yes  No

*(over)*

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## Recognition

The Congregation of Divine Providence appreciates the opportunity to acknowledge your commitment by publicly recognizing your contribution. If you prefer to remain anonymous, however, we will respect your wishes.

\_\_\_\_ I/We permit the Congregation of Divine Providence to use my/our name(s) in printed lists of planned gifts which may appear on the Congregation website and/or other publications. When published, it should appear as:

\_\_\_\_ I/We prefer to remain anonymous during my/our lifetime(s). You may recognize my/our gift after you receive it.

\_\_\_\_ I/We prefer to remain anonymous during and after my/our lifetime(s).

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<i>Donor Signature</i>		<i>Date</i>
<i>Printed Name:</i> _____		
<i>Address:</i> _____		
<i>City:</i> _____	<i>State:</i> _____	<i>Zip Code:</i> _____
<i>Phone: (H)</i> _____	<i>(W)</i> _____	<i>(C)</i> _____
<i>Email:</i> _____		
<i>Date of Birth</i> _____		

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<i>Spouse Signature</i>		<i>Date</i>
<i>Printed Name:</i> _____		
<i>Address:</i> _____		
<i>City:</i> _____	<i>State:</i> _____	<i>Zip Code:</i> _____
<i>Phone: (H)</i> _____	<i>(W)</i> _____	<i>(C)</i> _____
<i>Email:</i> _____		