



## BEQUEST INTENTION ACKNOWLEDGEMENT FORM

Confidential

St. Peter Cathedral School recognizes the generosity of those alumni, parents, and friends who have planned support for us through wills, trusts, life income funds, and life insurance gifts.

About you:

ALUMNI - Class Year \_\_\_\_\_  PARENT  FRIEND  FACULTY / STAFF  Other \_\_\_\_\_

### Donor Information

First Name: \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name: \_\_\_\_\_ Suffix: \_\_\_\_\_

Maiden Name (if applicable) \_\_\_\_\_

Address: \_\_\_\_\_ Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile #: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Spouse or other Beneficiary: \_\_\_\_\_

### Terms of Your Bequest

#### PART I: CONFIRMATION

I will provide for the St. Peter Cathedral School through my:

Will  IRA  Retirement Plan  Trust  Insurance Policy  Other \_\_\_\_\_

#### Designation of Bequest:

Unrestricted: Please use the proceeds for St. Peter Cathedral School's greatest need

General Endowment: Please add this gift to the general endowment

Restricted: Please use the proceeds as support for the following department/facility/other

\_\_\_\_\_

Named Endowment Fund: Please establish an endowed fund in the name of or to honor \_\_\_\_\_, to be used for \_\_\_\_\_

**My bequest is in the following form and amount:**

Estimated amount of gift \$ \_\_\_\_\_ / \_\_\_\_\_ %

Cash: Includes stock, bonds, and other liquid assets

Specific Asset Classes: Includes mutual fund accounts, real estate, or \_\_\_\_\_

Residuary: I bequeath the remainder of my estate after all bequests, debts, taxes and expenses are paid

Contingent: (no Annual Fund campaign credit) Terms: \_\_\_\_\_

\*This bequest will only take place if a named beneficiary predeceases you.

**PART II: ACKNOWLEDGMENT**

Please let us know if we may recognize your gift as a member of the St. Peter Cathedral School Annual Fund Campaign.

Yes, I give permission to list my name in publications as a member of the St. Peter Cathedral School Annual Fund Campaign

I wish my name to be listed as:

No, please list me as an anonymous donor

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE RETURN by Mail or Fax to: St. Peter Cathedral School/ Advancement Director /310 West 6<sup>th</sup> Street / Wilmington, DE / 19801**

St. Peter Cathedral School thanks you for your support...Your giving helps us continue the vision!