

Roanoke Catholic School Planned Gift Intention Form

It is my/our desire to provide a legacy of support to Roanoke Catholic School; I/we hereby verify that I/we have made a provision for a financial gift in my/our estate plans.

Name*							
Title	First		MI	Last	Last		
Name of Spouse							
Title	First		MI	Last			
Mailing Address*							
Address Line 1							
Address Line 2							
City		State			Zip		
Primary Email*		Secondary Email					
Primary mobile Phone*		Secondary Mobile	Phone				



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I/We have named Roanoke Catholic School as a Beneficiary:

Select all that apply

Type of Planned Gift*
Will or Trust Life Insurance PolicyIRA (or other retirement account)Donor Advised Fund
Other:
My/Our Gift is:
Select one
Choice*
Percentage of our estate:Stated amount:
My/Our Giving Priority
All planned gifts will be endowed in Roanoke Catholic School to support the school's mission of blending faith and learning in perpetuity. You may choose for your endowed gift to support a specific program/project or to generall support more than 135 years of Catholic education.
Please Choose One*
Specific Intent:General Support:
Additional Details or Instructions:



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Completion of this form is a notification of intent only and not intended to be

amount of (insert specific amount, residual or percentage of estate).

legally binding. Please discuss your planned giving intentions with your professional financial and legal advisors. Roanoke Catholic School is a tax exempt private educational institution recognized by section 501 (c)3 of the internal Revenue code. Tax ID # is 54-0840219. Contributions are tax deductible to the extents allowed by law.

Signature*	_		
Printed Name*			
First	MI	Last	
Spouse Signature	_		
Printed Name of Spouse			
First	MI	Last	
SAMPLE GIFT LANGUAGE FOR YOUR W (Tax ID# 54-0840219), 621 N Jefferson St. Ro			

*Required Information