Planned Gift - Statement of Intent

This statement is an expression of my intent to provide for the future of

through a planned or estate gift. The provision(s) made include the following:				
An outright bequest upon the passing of the donor, or the passing of the donor and spouse.				
A life insurance policy, in which is named as beneficiary or owner and beneficiary.				
Retirement account, in which is named as a beneficiary.				
A trust or annuity, with income reserved for the donor, spouse, or other income beneficiary.				
Other (please specify)				
The estimated value of my (our) gift is \$				
Purpose It is my wish that the gift be used:				
At it's discretion, to create the greatest impact in our faith community by supporting its most compelling needs and opportunities.				
For the following existing fund(s) or purpose:				
To create the following fund (please provide fund name and purpose):				
If your gift is directed to support an agency or designated fund, may we inform the beneficiary of your intent? Yes No				
Special circumstances of my gift include:				
I would like to work with the Diocese of Knoxville to create a gift agreement that details the purpose of my gift. Yes No				
I will provide you a copy of my will, policy, trust or beneficiary designation and appropriate				
contact information. Yes No				

Recognition*

The Diocese of Knoxville appreciates the opportunity to acknowledge your commitment of
stewardship to our faith community by publicly recognizing your contribution. If you prefer to
remain anonymous, however, we will respect your wishes.

	planned gifts, which	cese of Knoxville to use my/our name(s) in printed lists of may appear in the parish or diocesan web site and/or other 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).			
Do	nor Signature		Date	
	Printed Name:			
	Address:			
	City:	State:	Zip Code:	
	Phone: (H)	(W)	(C)	
	email:			
	Date of Birth:			
Sp	ouse's Signature		 Date	
	Printed Name:			
	Address:			
	City:	State:	Zip Code:	
	Phone: (H)	(W)	(C)	
	email:			
	Date of Birth:			

Thank you for your commitment to our faith community and your investment in its future. If you have any questions, please contact the Planned Giving Office of the Diocese of Knoxville at 865-584-3307 or dcatani@dioknox.org.