

SUCIEII Continuing the Legacy of Christ Through Charity

ESTATE GIFT CONFIRMATION

If you have made an estate gift commitment to Catholic Charities, please complete and return this form.

CONFIDENTIAL

Name	Spouse's Name
Address	
City	State Zip
Phone E-m	ail
□ I/We have named Catholic Charities of	of Eastern Oklahoma as a beneficiary in one or more of these types of gifts:
□ Will	□ IRA, pension, or other retirement account
□ Life insurance policy	Charitable Remainder Trust
Donor Advised Fund	□ Other Trust (living, charitable lead trust, etc.)
Codicil to a Will	□ Other (please speci-
fy):	
Your date of birth:/ Your spo Approximate amount of planned gift: Purpose of gift:	sion (where the need is greatest)
U Other purpose (please specify):	
	publish my name in the Caritas Christi Society membership list. (If you check Please check: Yourself: □ Yes □ No Spouse: □ Yes □ No
Comments:	
Signature:	Date:
Signature:	Date:

Thank you for making this lasting commitment to provide charity to people in need of our compassion. Catholic Charities of Eastern Oklahoma will follow your instructions and will maintain confidentiality regarding the specifics you provide about your gift plan. In order to substantiate your gift intentions, we ask you to provide a letter from your attorney or other professional advisor with copies of supporting documents. If you have any questions, please contact us at (918) 508-7116.

