

Single Life Charitable Gift Annuity Application

The Catholic Foundation for the People of the Diocese of Rockford

First Name _____ Middle Initial ____ Last Name _____

Address _____ City _____ State _____

Zip _____ Date of Birth _____ S.S. # _____

Phone _____



Gift Amount: \$ _____ **Projected Date of Gift:** _____

Type of Gift: ___ cash ___ stocks/bonds

If stocks or corporate bonds: Cost basis _____

Have you owned this security longer than one year from the above date of gift?

Yes _____ **No** _____

Income Plan: ___ Charitable Gift Annuity (CGA) **OR**

___ Deferred CGA with payments beginning _____

I/We give permission for the beneficiary to be notified of my/our charitable intent: Yes ___ No ___

(Over Please)

Charitable Remaindermen Distribution

It is my/our desire that the remaindermen of my/our gift be distributed in the following manner:

____ % to my parish, _____
____ Endowed through The Catholic Foundation (interest only used)
 ____ Unrestricted - to be used as needed
 ____ Restricted - to be used for _____
____ Outright gift (not endowed unless parish chooses to)
 ____ Unrestricted - to be used as needed
 ____ Restricted - to be used for _____

____ % to the bishop of the Rockford Diocese
____ Endowed through The Catholic Foundation (interest only used)
 ____ Unrestricted - to be used as needed
 ____ Restricted - to be used for _____
____ Outright gift (not endowed unless bishop chooses to)
 ____ Unrestricted - to be used as needed
 ____ Restricted - to be used for _____

____ % to _____
____ Endowed through The Catholic Foundation (interest only used)
 ____ Unrestricted - to be used as needed
 ____ Restricted - to be used for _____
____ Outright gift (**only option if not an entity of the Rockford Diocese**)
 ____ Unrestricted - to be used as needed
 ____ Restricted - to be used for _____

____ % to _____
____ Endowed through The Catholic Foundation (interest only used)
 ____ Unrestricted - to be used as needed
 ____ Restricted - to be used for _____
____ Outright gift (**only option if not an entity of the Rockford Diocese**)
 ____ Unrestricted - to be used as needed
 ____ Restricted - to be used for _____

I/we understand that this is not a contract and the above is only for information gathering purposes. I/we further request a proposal be written for the charitable gift with life income plan I/we have indicated on this Charitable Intent form.

Signature

Signature

Date