

Dear Donor,

We realize that many people who plan to support Community Foundation for Monterey County through their estate and/or financial plans prefer to keep their intentions private. However, by letting us know of your plans, we can thank you during your life, and confirm that we are able to fulfill your stated intentions.

Please know that completing this form is non-binding — we understand that you may change your plans at any time. Please also know that all information you share with us is kept strictly confidential.

Christine Dawson Senior Vice President Philanthropic Services Community Foundation for Monterey County Phone: 831.375.9712x126 Email: christine@cfmco.org

## Planned Gift Notification- Confidential

## Personal Information

Name:			
Spouse Name:			
Address:			
City:	State:	Zip:	
Phone:	Email:		
Date(s) of Birth:			

## Your Gift Intention

Please provide the following information and attach a copy of the documentation or appropriate language from your will or trust, if available. Please complete all that apply.

	support the mission of as described below:	of Commun	ity Foundation for	Monterey Cour	nty through a	
I/We ha	ive included a beques	t for CFMC	in my/our will or l	iving trust.		
I/We ha	ive named CFMC as a	a beneficiary	y of an asset:			
	Retirement Plan Bank, Investment, or Other Financial Account					
🗌 Li	fe Insurance Policy	Othe	er:			
	ive named CFMC as a ble remainder trust.	a revocable/	irrevocable <i>(circl</i> e	e <i>one)</i> beneficia	ry of a	
	value of my/our gift is e. (If possible, please i planned gift.)				% her wording	
	a general description o curities, how gift is to l	÷ .	•			
Yes, you ma	ly include me/us in list	ings of plan	ned gift donors.			
	how you would like yo e amount of your inten	( )			<b>/</b> listings.	
No, please o	do not include me/us i	n listings.				
Signature(s):						
Date:						
			Return form t	:0:		

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