

Archdiocese for the Military Services, USA

SERVING THOSE
WHO SERVE



Estate Plan Intention & Designation Form
Non-Binding & Confidential

Name: _____

Date of Birth: ____/____/____

Spouse's Name: _____

Date of Birth: ____/____/____

Preferred Phone: _____

e-mail: _____

I/we are pleased to inform you that my/our:

___ Will ___ Trust ___ Retirement Plan ___ Life Insurance ___ IRA ___ Other

includes a provision for the Archdiocese for the Military Services, USA.
(Copies of supporting documents may be attached but are not required)

Gift Designation:

___ Archdiocese for the Military Services, USA *(Area of Greatest Need)*
Or

___ Designated Area: _____

In honor of: _____

To help the Archdiocese for the Military Services, USA, plan for the future:

The approximate amount of my/our bequest, based on today's value is:

\$ _____ OR anticipated range of \$ _____ to \$ _____
Initials

Anything else you would like the AMS to know: _____

Donor Signature

Date

Spouse's Signature

Date

Attorney/Advisor Name (Print) (Optional)

Phone

Attorney/Advisor Signature (Optional)

Date