



Please save the form to your computer, fill out the form, and email it to us so your member profile can be included in the Catholic Community Foundation of the Diocese of Richmond ~ Lumen Christi Legacy Society.

\* Indicates a required field.

\* Name \_\_\_\_\_

\* Address \_\_\_\_\_

\* City \_\_\_\_\_ \* State \_\_\_\_\_ \* Zip Code \_\_\_\_\_

\* Phone \_\_\_\_\_ \* Email \_\_\_\_\_

Please check one:

The Catholic Community Foundation of the Diocese of Richmond may include my/our name(s) in the Lumen Christi Legacy Society listing. Neither amount nor designation will be included in the listing.

I/we prefer to remain anonymous. Please do not include my/our name(s) in the Lumen Christi Legacy Society listing.

<b>The Source of Your Bequest</b>
<p>Please indicate your estate provisions by checking one or more appropriate boxes.</p> <p> <input type="checkbox"/> Will                      <input type="checkbox"/> Life Insurance Policy                      <input type="checkbox"/> IRA  <input type="checkbox"/> Retirement Plan                      <input type="checkbox"/> Charitable Remainder Trust                      <input type="checkbox"/> Charitable Lead Trust  <input type="checkbox"/> Charitable Gift Annuity                      <input type="checkbox"/> Other (specify): _____ </p>
<b>For a Specified Amount (select one)</b>
<p><input type="checkbox"/> Amount: _____                      <input type="checkbox"/> Percentage: _____</p>
<b>How Your Gift be Used (select one). Minimum contribution \$25,000.</b>
<p><input type="checkbox"/> Create an endowment in my/our name and only distribute income earned from this investment to (select one):</p> <p> <input type="checkbox"/> Parish: _____  <input type="checkbox"/> School: _____  <input type="checkbox"/> Catholic Organization: _____  <input type="checkbox"/> Catholic Community Foundation's discretion of area of greatest need </p> <p><input type="checkbox"/> Add this gift to the existing endowment (indicate): _____</p> <p><input type="checkbox"/> Create a donor-advised fund in my/our name.</p>

Email completed form to: [MKeenan@richmonddiocese.org](mailto:MKeenan@richmonddiocese.org) or call (804) 622-5221 for further assistance.