



PLANNED GIFT ACKNOWLEDGMENT/CONFIRMATION FORM

(The following form may be used by a local United Methodist Church to maintain a record of a donor's intended planned gift.)

Name of Donor: _____

Name of Spouse (or other beneficiary): _____

Date(s) of Birth: ____/____/____ (Donor) ____/____/____ (Beneficiary)

PART I CONFIRMATION Please let us know the terms of your Planned Gift.

A. Type of Planned Gift:

I have provided for _____ United Methodist Church through my:

- Will IRA Retirement Plan Trust Insurance Policy Other

B. Designation of Planned Gift:

- Unrestricted: Please use the proceeds in support of those areas with the greatest need, as determined by the _____.
- General Endowment: Please add the proceeds to the church's general endowment.
- Restricted: Please use the proceeds for the _____.
- Named Endowed Fund: Please establish an endowed fund in the following name _____, to be used for _____.

I understand that a minimum of \$_____ is needed to endow a fund, and that over time this minimum will likely increase. Please see the attached list of endowed fund gift opportunities.

C. My Planned Gift is in the following form and amount:

- Estimated Amount: Dollar Amount \$_____ Percent of the Estate _____%
- Cash: Amount \$_____
- Specific Asset: _____
- Real Estate Interest: _____

Residuary: Estimated Amount \$ _____

A bequest of all or part of the remainder of your estate after other planned gifts, debts, taxes and expenses are paid.

Contingent: Terms _____
A planned gift to the church takes place only if the beneficiaries named in your will predecease you.

PART II ACKNOWLEDGEMENT Please let us know if/how we may recognize your generosity.

YES, I give the church permission to publish my/our name(s) in church publications and donor acknowledgements. I understand that this will serve as an incentive for other loyal supporters to give.

YES, please enroll me as a member of the _____ Planned Giving/Legacy Society.

How do you wish your name(s) to be listed in any publications that acknowledge your gift intention?

NO, I wish my gift to remain anonymous.

I understand that I am NOT making a legal or binding commitment by submitting this acknowledgement. Furthermore, the Church should understand that the size of my future gift may be significantly different from the amount estimated above for the purposes of valuation.

Signed: _____

Print Name: _____

Date: _____ Phone: _____

Please return this completed acknowledgment form to:

_____ United Methodist Church

Address _____

City, State, Zip code _____

NOTE: Yellow sections to be completed by the church prior to distribution.

Listing of Endowed Funds and Minimum Giving Levels

Name of Fund	Minimum Giving Level
1.	
2.	
3.	
4.	

SAMPLE

Note: This sample document was prepared by the United Methodist Foundation of Michigan and is to be used only as a guide for local churches in developing their own statement of policy.

This sample document can be supplied as a Word document. Click [here](#) to contact us or call 888.451.1929

Revised 12/1/11