## **Planned Gift Confirmation Form**

Kern Community Foundation expresses its appreciation for your commitment to support our community's future with a planned gift. Please take a moment to complete this confidential form and return it to us as a confirmation of your intentions:

I/We confirm the following planned gift to Kern Community Foundation:			
☐ Bequest ☐ Charitable Gift Annui ☐ Beneficiary Designa ☐ Retirement	ty  Pool tion of:	ritable Remainder Trus ed Income Fund □ Life Insurance	it ☐ Investment Account
☐ Annuity		Other:	
Estimated \$ value of gift	:		
Designation of gift:		unity Foundation	Unrestricted
	☐ New Fund: _		
	owment. Please ir	ndicate below how you	cognizes donors who have made would like your name to appear
☐ I/We grant you permission to publish my/our name(s) as follows:			
(Please print your name as you would like it to appear in our recognition materials.)  I/We wish to remain an anonymous member(s).			
Name	Name of spouse (if applicable)		
Address		City, State	Zip
Phone 1	Phone 2		Email
Date of birth (dd/mm/yyyy)		Spouse date of	birth (dd/mm/yyyy)
Signature		Spouse's signat	ure
Date		Date	