

CONFIDENTIAL PLANNED GIFT CONFIRMATION

Name:		Date of Birth:/			
Spouse: Street Address:			Phone:_		
City	State	Zip Code			
I HAVE INCLUDED CH	IRIST SCHO	OL IN MY ESTA	TE PLAN AS	S FOLLOWS:	
Type of Provision:				Est	timated Amount:
A. Bequest in Will or Livi	ng Trust			\$	
B. Life Insurance Policy Be Policy Type:	eneficiary Term	□Whole Life		\$	
C. Beneficiary Designation	n in My / Our	Retirement Plan/	TRA/401k	\$	
D. (1) Life Income Plan:☐ Charitable Ren(2) Payout Rate Percer		□ Charitable Git	ft Annuity	□ Charitab	le Lead Trust
(3) Date of Birth of In				\$	
E. Donor Advised Fund a					
F. Certificate of Deposit-I			st School		
G. Other Method - (Pleas	e describe)				
We welcome any attachment If you have a specific purp	s or excerpts fror	n your estate plan w	hich further de	scribe the nature	of your gift to Christ School
If the purpose described n another useful purpose de	termined by C	Christ School?	□ YES □ NO	5	
If not and you have anoth	er purpose in v	which your gift sho	ould be used,	please describe	e it here:
May we publish your namsupport of Christ School?		honor you and to	o further enco	ourage others to	participate in
Signature:				Date:	/
Thank you for your suppo School to educate young r		,	the school, yo	ou enhance the	e ability of Christ

500 Christ School Road, Arden, NC 28704

(828) 684-6232

CHRIST SCHOOL