



The Catholic Foundation
ARCHDIOCESE OF SANTA FE

Legacy League Bequest Form

Name _____ Date of Birth _____

Street Address _____ City _____

State _____ Zip Code _____ Phone (H) _____ (W) _____

I have included The Catholic Foundation in my estate planning.

- I wish to be listed as a Legacy League member in The Catholic Foundation's annual report and other publications.***
- I wish to remain anonymous.***

The following information is optional and is for internal use only; it will be held in strict confidence in the Foundation office. Please check the appropriate boxes:

- I have made a specific bequest in my will or trust, or the will or trust of the survivor of my spouse and myself. The amount or percentage is (optional): _____
- I have made a residuary bequest in my will or trust, or the will or trust of the survivor of my spouse and myself. The amount or percentage is (optional): _____
- I have made a contingent bequest in my will or trust, or the will or trust of the survivor of my spouse and myself. The amount or percentage is (optional): _____
- I have named the Foundation as a remainder beneficiary under a charitable remainder trust. The amount or percentage is (optional): _____
- I have named the Foundation as a beneficiary in a life insurance policy. The face amount is (optional): _____
- Other (please describe): _____
- I have attached a copy of the will, trust or life insurance provision which mentions The Catholic Foundation.

Signature _____ Date _____

**Please return this form to:
The Catholic Foundation, 4333 Pan American Freeway NE, Suite D,
Albuquerque, NM 87107 or email to: info@thecatholicfoundation.org**