



## Lourdes University Legacy Society Declaration of Intent Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

I have made a provision for Lourdes University in my estate plan as follows:

	Estimated Amount
1. Outright bequest in will:	
(a) Specific dollar amount	\$ _____
(b) Specific property ( <i>please describe</i> ) _____	\$ _____
(c) Share of entire residue of estate (_____%)	\$ _____
2. Trust to be funded via estate ( <i>please describe</i> )	
(a) Charitable Remainder Trust _____	\$ _____
(b) Charitable Lead Trust _____	\$ _____
(c) Gift Annuity _____	\$ _____
(d) Other _____	\$ _____
3. As beneficiary of a life insurance policy	\$ _____
4. As an IRA/retirement plan beneficiary	\$ _____
5. Other ( <i>please describe</i> ) _____	\$ _____

\_\_\_\_\_  
Signature  
Professional Advisors (Attorney, CPA, Trust Officer, Financial Advisor)

\_\_\_\_\_  
Date

Special Notes \_\_\_\_\_

\_\_\_\_\_

If your gift to Lourdes University is designated for something other than general use, please describe restrictions in an attached statement. Attachments or letters that further describe the above provision(s) i.e. a copy of the related section of your will, trust agreement, or other document containing the provision(s) will assist our records department in keeping accurate information regarding your intentions.

**Please return this form to:**  
**Brittany Telander • Director of Donor Relations**  
**Lourdes University • 6832 Convent Blvd., Sylvania, Ohio 43560**

Direct: 419-517-8971 • BTelander@lourdes.edu