

CIRCLE OF LIGHT

Membership Confirmation Form

Episcopal Impact Fund's Circle of Light honors individuals and families who make an investment in the future of the Impact Fund by including the organization in their estate plans. Thank you for your visionary support!

I/we accept the invitation to join other supporters of Episcopal Impact Fund (formerly Episcopal Charities) in becoming a member of the **Circle of Light**.

Name 1	Birthdate
Name 1 – Email address	Mobile phone
Name 2	Birthdate
Name 2 – Email address	Mobile phone
Mailing address	Home phone

- I/we consent to have my/our name(s) appear in **Circle of Light** print and online media as a way of encouraging others to also remember Episcopal Impact Fund; or
- I/we wish to remain anonymous.

Confidential

- I/we have made a substantial lifetime gift to help endow the future of Episcopal Impact Fund.
- I/we have included Episcopal Impact Fund in my estate plans by means of
- Bequest in will
 - Beneficiary of revocable living trust
 - Beneficiary of IRA / 401(k) / 403(b) / variable annuity / fixed annuity
 - Beneficiary of life insurance policy
 - Charitable gift annuity
 - Remainder beneficiary of irrevocable / charitable remainder trust
- The current value of my/our gift is approximately \$_____
- I/we do not know the value of the gift.
- I/we do not wish to disclose the value of the gift.

Signature	Date
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Please fill out this form and return to Episcopal Impact Fund's Advancement Director.
Scan and email to plannedgiving@episcopalimpact.org or mail to
Episcopal Impact Fund, 1055 Taylor Street, San Francisco, CA 94108, attn: Advancement Director