



Episcopal Impact Fund

CREATING PATHWAYS OUT OF POVERTY

Notification of Gift

Date _____

I/We share Episcopal Impact Fund’s vision of a Bay Area where all families and youth have access to the resources and opportunities they need to thrive. I/We are making this gift to support the continuing work of the Impact Fund.

	Institution	Security / Quantity	Estimated Current Value
Example	<i>Schwab</i>	<i>Apple stock / 625 shares</i>	<i>\$100,000</i>

	Institution	Security / Quantity	Estimated Current Value
IRA Rollover			

	Institution	Account Type	Estimated Current Value
Beneficiary Designation			

	Gift Type (circle one)	Carrier Name and Policy Information	Estimated Current Value
Life Insurance	beneficiary ownership		

	Institution	Security / Quantity	Estimated Current Value
Securities			

Episcopal Impact Fund and I agree that I am not legally bound by this notice and that I may choose to add to, subtract from, or revoke this gift at any time without notice to Episcopal Impact Fund.

I am making this gift

In honor of _____ In memory of _____



Episcopal Impact Fund

CREATING PATHWAYS OUT OF POVERTY

This gift is from

Name

Name

Address

Address

City & State

Zip Code

City & State

Zip Code

Telephone (Day & Evening)

Telephone (Day & Evening)

Email

Email

Signature

Date

Signature

Date

To encourage others to participate, I/we give permission for the Episcopal Impact Fund to list my/our name(s) in its public communications.

(Please print your name(s) as you wish it to appear.)