

Confirmation of Your Legacy Gift



This form is to help you provide information about your deferred gift to Family House to ensure that it will be used in accordance with your wishes. Please note that this document is not legally binding and if the information contained here is contradicted by your estate planning or gift document, the terms of the estate planning or gift document will govern.

SECU Family House at UNC Hospitals Tax Identification Number is # 91-2108125

Name(s):	
Address:	
Date(s) of Birth:	
Email address: Phone:	
Please describe your deferred gift (or attach a copy of documentation, if you prefer): Will Revocable "Living" Trust Retirement Account Other:	
By including us in your estate plan you will become a member of The Legacy Family. Do you wish to remain anony \square Yes \square No * please note that if the answer here is inconsistent with your estate planning or gift document estate planning or gift document will govern	
Please provide an estimate of the current value of your deferred gift to Family House. All such information will be confidential. This estimate does not bind you or your estate in any way. Estimate:	•
Note where the proceeds of your planned gift should be placed: * please note that unrestricted gifts allow Family House the flexibility to apply your gift how we currently need it not be a supply your gift how we currently need it not be a supply your gift how we currently need it not be a supply your gift how we currently need it not be a supply your gift how we currently need it not be a supply your gift how we currently need it not be a supply your gift how we currently need it not be a supply your gift how we currently need it not be a supply your gift how we currently need it not be a supply your gift how we currently need it not be a supply your gift how we currently need it not be a supply your gift how we currently need it not be a supply your gift how we currently need it not be a supply your gift how we currently need it not be a supply your gift how we currently need it not be a supply your gift how we currently need it not be a supply your gift how we currently need it not be a supply your gift how we can be a supply your gift	10st
Split between funds in this manner:% Legacy Endowment% Unrestricted Fund	
Who would you like to receive reports on Family House and its progress after the planned gift is executed?	
(Name, Address, and Phone Number of person to receive reports)	

Donor's Signature

Co-Donor's Signature

Date

This document does not bind you or your estate. By signing this form, you are simply acknowledging your current plans to benefit Family House in the future and giving us guidance as to your wishes.

Please mail this form to: Martha G. Aldridge, Director of Development at SECU Family House at UNC Hospitals 123 Old Mason Farm Road, Chapel Hill, NC 27514

Please direct questions to: Martha G. Aldridge, Director of Development at 919-932-8003 or martha@secufamilyhouse.org