



# PLANNED GIFT STATEMENT OF INTENT

This statement is an expression of my intent to provide for the future of St. Dominic High School through a planned or estate gift. The provision(s) made include the following:

- An outright bequest** upon my passing, or the passing of myself and my spouse.
- A life insurance policy**, in which St. Dominic High School (31 St. Dominic Drive, O'Fallon, MO 63366) is named as a beneficiary or owner and beneficiary.
- A retirement account**, in which St. Dominic High School (31 St. Dominic Drive, O'Fallon, MO 63366) is named as a beneficiary.
- A trust or annuity**, with income reserved for the donor, spouse, or other income beneficiary.
- Other** (please specify): \_\_\_\_\_

The estimated value of my/our gift is: \_\_\_\_\_

It is my/our wish that the gift be used (check one):

- With no restrictions**, to create the greatest impact in our faith community by supporting St. Dominic High School's most compelling needs and opportunities.
- With the following restrictions**, for the following existing fund(s) or purpose(s):  
\_\_\_\_\_
- To create\* the following fund** (please provide fund name and purpose):  
\_\_\_\_\_

*\*A representative of St. Dominic High School's Advancement Office will contact me to discuss.*

I understand that St. Dominic High School wishes to acknowledge my stewardship publicly.

**During my/our lifetime**, I (check one)  do  do not permit St. Dominic to use my/our name(s) in printed lists of planned gifts. These published lists may appear on the school's website, its annual giving report, and/or other publications.

**After my/our lifetime**, I (check one)  do  do not permit St. Dominic to use my/our name(s) in printed lists of planned gifts. These published lists may appear on the school's website, its annual giving report, and/or other publications.

I (check one)  will  will not provide St. Dominic High School a copy of my will, policy, trust or beneficiary designation and appropriate contact information for my attorney or other representative.

My attorney/representative's name and phone number are: \_\_\_\_\_

DONOR SIGNATURE	DATE	SPOUSE SIGNATURE	DATE
DONOR PRINTED NAME		SPOUSE PRINTED NAME	
STREET ADDRESS		STREET ADDRESS	
CITY/STATE/ZIP		CITY/STATE/ZIP	
PHONE		PHONE	
EMAIL		EMAIL	

Thank you for your gift to our faith community and your investment in St. Dominic High School's future.

If you have any questions, please call (636) 240-8303 ext. 119 or email [plannedgiving@stdominichs.org](mailto:plannedgiving@stdominichs.org).

Please mail form to: St. Dominic High School, Attn: Planned Giving, 31 St. Dominic Drive, O'Fallon, MO 63366