



ARCHBISHOP  
**CARROLL**  
 HIGH SCHOOL



# ESTATE GIFT CONFIRMATION

If you have made provisions in your estate for a gift to Archbishop Carroll High School, please take a moment to complete this form and return it to us. If you are comfortable sharing documentation of your estate gift, please include such documentation with this form to enable us to more effectively steward your gift. The details on this form as well as any additional information you share with us will remain confidential.

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

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

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

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

I/we have named Archbishop Carroll High School as a beneficiary in:

- Will   
  IRA/Pension/ or Other Retirement Account   
  Lead Trust  
 Charitable Remainder Trust (Trustee is not Carroll)   
  Revocable or Living Trust  
 Life Insurance Policy   
  Other (Please Specify: \_\_\_\_\_)

**Approximate Current Value:** \_\_\_\_\_

**Gift Designation (if any):** \_\_\_\_\_

**Comments:** \_\_\_\_\_

**This document does not bind you or your estate. You may choose to increase, decrease, or revoke this bequest at any time at your sole discretion.**