



Estate Gift Intention Form

So that we may properly thank you and acknowledge your future gift to the Albuquerque Public Schools Education Foundation (APSEF), please complete the following information. *Your information will remain confidential, and we do not share our mailing list.*

Donor Contact Information

Donor Name

Spouse/Partner Name (if applicable)

Mailing Address

City

State

Zip Code

Telephone Contact (____) _____ Home (____) _____ Cell

____/____/____
Donor DOB

____/____/____
Spouse/Partner DOB

Email Address

Preferred method of communication (check all applicable) Phone E-mail Hard Copy

Personal Representative (attorney, financial advisor, executor of estate)

Name _____ Relationship _____

Organization _____

Street Address

City

State

Zip Code

Phone (____) _____ Email Address _____

_____(Please check here is a personal representative has not been selected)

Purpose of Gift

This is an unrestricted gift

This gift is to be used for the following purpose(s) or program(s):

Type of Gift

Will Revocable Trust Life Insurance Retirement Plan Irrevocable Trust
 Annuity
 Other (please describe): _____

Description of Gift

I estimate today's value of my gift to be \$ _____

If you plan to give a percentage of you post tax estate to APSEF, please indicate the percentage _____

If you plan to donate a tangible property to APSEF please describe the property (e.g., house, business, art work) _____

Is this a "contingent" gift? Yes No

(APSEF is an alternative beneficiary and will only receive the gift under certain circumstances.)

If yes, please describe the circumstances: _____

Recognition of Gift

My gift is anonymous.

My gift may be acknowledged APSEF's discretion.

My gift may be acknowledged with the following considerations (e.g., do not disclose amount): _____

Individuals to be notified

I/we would like the following individual(s) notified that my/our planned gift has been received and distributed:

Name	Street Address	City	State/Zip Code	Relationship
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Name	Street Address	City	State/Zip Code	Relationship
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Name	Street Address	City	State/Zip Code	Relationship
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I/We understand this is not a legal or binding commitment on my/our estate. APSEF should understand the size of this future gift might be significantly different from the amount estimated above. If for any reason in the future APSEF is no longer included in my/our plan, I/we will notify APSEF so that APSEF's records may be updated.

Donor Signature

Donor Signature

Date

Date

If you have any questions regarding this form or your planned gift intentions, please contact:

Executive Director
Albuquerque Public Schools Education Foundation (APSEF)
Physical: 6400 Uptown Blvd., N.E., Suite 630E , Albuquerque, NM 87110
Mailing: P.O. Box 25704, Albuquerque, NM 87125-0704
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