



Saint Peter's
UNIVERSITY

2023-2024
LEGACY CHALLENGE
Letter of Intent

If you name Saint Peter's University as a beneficiary in your will, trust, retirement plan, donor advised fund, charitable gift annuity or life insurance policy

AND complete this form to tell Saint Peter's of your plans

THEN, Saint Peter's will receive a 10% matching donation (up to \$10,000) to the General Scholarship Fund, while matching funds are still available.

Name(s) _____ Class _____ Date of Birth: ____/____/____

Address _____

City, State, ZIP _____

Telephone _____ Email _____

Please include my spouse: _____ Date of Birth: ____/____/____

I WOULD LIKE FOR MY PLANNED GIFT TO QUALIFY FOR THE SAINT PETER'S LEGACY CHALLENGE

I/We have included Saint Peter's University as a beneficiary of my/our:

- ☐ Will or Living Trust
- ☐ Retirement Fund
- ☐ Donor Advised Fund
- ☐ Life Insurance

- ☐ Charitable Gift Annuity
- ☐ Charitable Remainder Trust
- ☐ Charitable Lead Trust
- ☐ Other _____

The approximate value of this gift is:

☐ A specific dollar amount: \$ _____

☐ A percentage: ____% with an estimated value of: \$ _____

Please choose one:

- ☐ My/Our planned gift is unrestricted and is to be used as per the University's Gift Acceptance policy at the time of my death.
- ☐ My/Our planned gift is designated for the following purpose:

A 10% matching donation (up to \$10,000) of your planned gift will be directed to the General Scholarship Fund at Saint Peter's University, while matching funds are still available.

I understand that this form is not binding and I may change my mind at any time.

Donor Signature: _____ **Date:** _____

Second Donor Signature: _____ **Date:** _____

- ☐ Saint Peter's University may publish my/our names in its Pavonia Heritage Society List as a motivation for others to leave a future gift to benefit the University.
- ☐ I/We wish this gift intention to remain anonymous.



Return to: Saint Peter's University | 2641 John F. Kennedy Boulevard | Jersey City, NJ 07306