

Every person has a story, and every story matters to God.

Wichita Falls Faith Mission, Inc. PO Box 965, Wichita Falls, TX 76307 940.723.5663 faithmissionwf.org

Planned Giving Statement of Intent

I/we are gift to Wichita Falls Faith Mission, Inc. (E support their mission to provide Christ-ce services that lead the homeless toward s	IN 75 – 1779401) to entered programs and	Help rewrite stories of homelessness tomorrorrow Leave a Legacy
Your Legacy		
Details of your legacy will help us plan fo	or the future. This information	n is strictly confidential.
<u> </u>	retirement assets in which \acopy of a Beneficiary Designderss listed above, or scan	Vichita Falls Faith Mission, Inc. is named ination form through your Retirement Plan and email it to
The estimated	value of my (our) gift is \$	
I would like my gift to support:		
 Highest priorities deemed by Wic Faith Mission homeless shelter Faith Refuge homeless shelter Other (please specify): 		
In the event that it becomes impossible, Board of Directors will direct the gift to th consistent with the spirit and intent of the	e best advantage of Wichita	
Contact Information		
Name:	Spouse (if appl	icable):
Address:		
City:	State:	Zip Code:
Phone Number:	Email Address: _	

Birthdate (M/D/Y): / / /	Spouse Birthday (if applicable): / /	Spouse Birthday (if applicable)://		
Signature:	Date:	-		
Spouse signature (if applicable):	Date:	_		
Thank you. We would be honored to reco	ognize you in our donor publications where we thank those that have	_		

Thank you. We would be honored to recognize you in our donor publications where we thank those that have made planned gifts to our organization. To confirm how you wish to be recognized, please fill out the information below.

Recognition Approval

The Board of Directors of Wichita Falls Faith Mission, Inc. appreciates the opportunity to acknowledge your commitment to the community by publicly recognizing your contribution. If you prefer to remain anonymous, however, we will respect your wishes.

 I permit Wichita Falls Faith Mission, Inc. to use my name in printed lists of planned gifts, which may appear in the organization's newsletter, website, or other publications.
 Please specify how you would like your name to be listed:

Example: The Bennett Family, Jane and John Bennett, Ms. Jane Bennett

Or

- o I prefer to remain **anonymous** during my lifetime/our lifetimes. You may recognize my/our gift after you receive it.
- o I prefer to remain **anonymous** in donor publications during and after my/our lifetime(s).