



Confidential Declaration of Planned Gift Intent

I/We are pleased to inform you of a planned gift to benefit PBS KVIE. I/We understand that this commitment is revokable and can be modified at any time.

Name(s)

Address City State Zip

Phone Email

Type of Gift (check all that apply):		Estimated Value (optional): \$_____	
Gift by Will or Trust	Outright bequest	Residual bequest (__%)	
Designation of Retirement Plan Assets			
Designation of Life Insurance Policy			
Charitable Trust	Irrevocable	Revocable	
Gift of Property			
Please describe: _____			
Other			
Please describe: _____			
Please provide contact information for your executor and/or plan administrator (optional):			
_____ Name/Company	_____ Phone	_____ Email	

I/We wish to join the Legacy Circle recognition program.

No, I/We do not wish to join the Legacy Circle.

We respect your confidentiality and will only publish your name(s) in association with the Legacy Circle with your express permission:

Yes, I/We prefer to be listed as: _____

No, I/We would like our gift to remain anonymous

Signature Date

Signature Date

Please return this form and any documentation you would like to share to:
PBS KVIE Leadership Giving, 2030 W. El Camino Avenue, Sacramento, CA 95833
916-641-3595 legacy@kvie.org