



**THE SOCIETY OF  
ST. VINCENT DE PAUL**

**FEED. CLOTHE. HOUSE. HEAL.**

## Gift Intention Directive

To: The Diocesan Council for the Society of St. Vincent de Paul, Diocese of Phoenix  
420 W Watkins Rd, Phoenix, AZ 85003 | 602.261.6806 | Tax ID 86-0096789

Name  
Address  
City, State Zip

Because we believe in the work of St. Vincent de Paul and recognize the growing demand made on its services and programs, we wish to help St. Vincent de Paul serve others in need. We want to share our vision and compassion through this legacy gift.

We have named St. Vincent de Paul in my estate through our \_\_\_\_\_.

The total approximate value of our legacy gift to St. Vincent de Paul is \$\_\_\_\_\_ or \_\_\_\_\_%.

This gift is designated to be used by St. Vincent de Paul for \_\_\_\_\_.

- ☐ You may publish our names to encourage the participation of others.
- ☐ We prefer our gift to be anonymous. Please do not publish our names.

### Advisor Information:

We wish to keep St. Vincent de Paul informed of our legacy gift changes and authorize my Personal Representative, Trustee or Advisor to discuss with St. Vincent de Paul this matter. The following is the contact information for our Personal Representative, Trustee or Advisor:


Name \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

Company Name \_\_\_\_\_


Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

**We understand that this Gift Intention Directive is not legally binding and may be changed by us without notice at any time. We are sharing this information with the understanding that it be held in strict confidence and utilized only for the purpose intended.** In the event that the original purpose of the gift as stated above can no longer be met or becomes impractical, SVdP is hereby authorized to use the gift for a purpose that is as closely aligned as possible with my original intent, as determined by SVdP's Board of Directors. SVdP shall make reasonable efforts to consult with me or my designated representative before repurposing the funds.

  
Name \_\_\_\_\_

\_\_\_\_\_ Date

  
Name \_\_\_\_\_

\_\_\_\_\_ Date