

## LEGACY INTENTION FORM

Please complete this form to document your planned gift. Knowing your intentions helps Parish of the Epiphany plan for the future. Your intent enrolls you as a member of the Cornerstone Society. Thank you!

Name(s)				
City	State	Zip	Code	
Phone	E-mail			
Gift Description	:			
□ Will	□ Trust	Annuity	Donor Advised Fund	
🗆 Life Insurance	IRA or Retirement Plan	🗆 Real Estate		
□ Other:				
Notes/Additiona	I Information:			
be held in strict co	ed is a copy of the relevant sect			
□ Name(s) may be	included in Parish of the Epiph	any and Cornersto	ne publications or listings.	
Please use the follo	wing name(s) in all publications		· · ·	
$\square$ l/we wish to rem	ain anonymous.			
Signature			Date	
Signature			Date	
Fo	r questions, please contact	: planned-giving@3	crowns.org	
781-729-	1922   3crowns.org   70 Ch	urch Street, Wincl	nester, MA 01890	

Legal Name: The Parish of the Epiphany; Tax I.D. Number: 042146060