

Planned Gift Form



I have decided to invest in our Military Heroes via the PenFed Foundation by establishing a gift in my will, trust, or by beneficiary designation. My gift is revocable and I can change my plans at any time.

Name _____ Title _____

Address _____

City _____ State _____ Zip _____

Email _____ Phone _____

1. I have named the PenFed Foundation as a beneficiary of
 Will/Living Trust Retirement Plan Life Insurance Policy Other: _____

Name of Will/Trust or Policy _____

Policy # _____ Date of Will/Trust or Policy _____

Please be sure to update your documentation to reflect your generous donation.

2. My gift is in the specific amount of: \$ _____
 My gift is stated as a percentage and is worth approximately: \$ _____
(Please provide your best estimate of the value of your gift based on the approximate current value of your assets.)

3. My gift is contingent and depends on the prior death of a spouse, partner, or child.
 My spouse/partner has done the same. The PenFed Foundation will receive a gift upon the death of the second-to-die.

Recognition

- I would like to be recognized as:

(Most listings are in the format of First and Last Name(s) only. For example - Jane Smith or Jane and Michael Smith)

- I want to keep my name private. Please list me as Anonymous.

- Please add me to the mailing list.

Signature _____ Date _____

For questions or more information:
contact donate@penfed.org or call 703-838-1200

Please return to:
PenFed Foundation
2930 Eisenhower Avenue
Alexandria, VA 22314