

Thank you for your intention to include Oak Hills Memorial Foundation in your estate plan. Please complete this form with as much detail as you are willing to share. Information about your gift will remain confidential and does not create a binding obligation.

☐ New Intention ☐ Updated Intention
MY INFORMATION
NameSpouse Name (if joint gift)
Address
PhoneEmail Address
GIFT INFORMATION
I have provided a gift to Oak Hills Memorial Foundation as set forth in my:
☐ Will or Trust ☐ Life Insurance Policy ☐ Charitable Gift Annuity ☐ Charitable Remainder Unitrust
Retirement Plan or Beneficiary Designation (401(k), 403(b), IRA, Keogh, Brokerage Account)
Other Asset(s)
Oak Hills Memorial Foundation is a contingent beneficiary of the indicated asset above. Please explain below:
Please indicate one of the following options and complete the applicable information: My gift has a set value of \$ My gift is% of my estate, with a conservative estimated value* of \$ *Oak Hills Memorial Foundation understands that the size of my estate and future gift may change.
GIFT PURPOSE
My bequest or planned gift is designated for:
☐ In Honor or Memory Of:
My bequest or planned gift is to be used for:
☐ Leave a Legacy Endowment ☐ Unrestricted
Other (Please note which area(s) you wish to benefit and provide percentages or specific amounts for multiple areas.)

	morial Foundation will be recognized in our annual report as well
as various other ways throughout the year	ar.
☐ Please list my name(s) as follows:	
\square I prefer no public recognition	
I understand this form does not crea	ate a binding obligation and any details about my gift will remain
confidential.	, , , , , , , , , , , , , , , , , , , ,
Signature:	Spouse's Signature:
Date	Date

RECOGNITION

Please sign and return this form to: Oak Hills Memorial Foundation By Mail: 1314 8th Street North New Ulm, MN 56073 By Phone: (507) 233-0851 • By Email: wendylang@oakhillsnewulm.com