



## Bequest Gift Intent

Full Name \_\_\_\_\_

Spouse/Partner \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Preferred Phone (    Home    Cell    Work)

\_\_\_\_\_

Home Email

\_\_\_\_\_

### MY BEQUEST

This is to inform you that I/we have included a charitable bequest to CRC in our estate plan.

This gift has been designated through a:

Bequest

Charitable remainder trust

IRA/Retirement plan beneficiary

designation

Life insurance policy

Other: \_\_\_\_\_

Additional details you wish to share about your gift:

\_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Community Resource Center is a 501(c)(3) charitable tax-exempt organization.  
Tax identification #95-3497926

**Please return this form to:**  
Community Resource Center  
650 2nd St., Encinitas, CA 92024  
development@crcncc.org