



Saint John's School of Theology and Seminary

As an expression of my commitment to Saint John's School of Theology and Seminary, I am making provision to support the mission of Saint John's School of Theology and Seminary through . . .

My Will

A Trust Agreement (specify type)

A Life Insurance Policy (company)

Other (please specify)

In the approximate amount of \$

My gift is for . . .

Saint John's School of Theology and Seminary

My gift is . . .

Unrestricted (where needed most)

Restricted to
please describe

This Letter of Intent is an expression of my present plans, is subject to revocation or modification by me, and is not legally binding on me or my estate.

Signature

Date

Name(s) as you want it/them to be listed in our records

Check here to permit the use of your name as participating in this program.
(Use of names is motivating and exemplary to others.)

Once complete, click "File" in upper left corner, "Save As," to your computer. **Email this file** to the Director of Development: gellens@csbsju.edu

GRATEFULLY ACKNOWLEDGED

Saint John's Representative

Date

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