

Gift Annuity Application

I would like to arrange a gift annuity with the friars of the Capuchin Province of St. Joseph in the amount of \$_____ (minimum amount is \$5,000). Enclosed is my check or securities for that amount. If using securities, cost basis is \$ _____ .

Type of Gift Annuity (Please check one) (Please check one)
 One-life Annuity Immediate payment
 Two-life Annuity Deferred payment
Date of first Deferred Payment MO. _____ YR. _____

Payments to be made: Annually Semi-annually
 Quarterly Monthly

I prefer to have my annuity payment electronically deposited into my checking account.
PLEASE INCLUDE A VOIDED CHECK IF YOU CHOOSE THIS OPTION.

PLEASE NOTE THAT A DIRECT TRANSFER OF IRA ASSETS CANNOT BE MADE TO FUND A GIFT ANNUITY.

First Annuitant

Name (please print) _____
Address _____
City _____ State _____ Zip _____
Birth date / / Phone Number () _____
Social Security Number _____
Signature _____ Date _____

Second Annuitant

If establishing a two-life annuity, please fill in the following information for the second annuitant.
This gift will be funded with: Solely owned OR Jointly owned property

Name (please print) _____
Address _____
City _____ State _____ Zip _____
Birth Date / / Phone Number ()- _____
Social Security Number _____ Relationship _____
Second Annuitant Signature _____