

OPERA DELAWARE



PLANNED GIVING REQUEST INFORMATION

Request for Information

Planned Giving Request Information

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Name of first donor: _____

Name of second donor (if applicable): _____

Address: _____

Telephone: _____ Email: _____

I have named OperaDelaware as a beneficiary in my:

- Will
- Life Insurance Policy
- Retirement plan assets

Please contact me with information about:

- Making a bequest to OperaDelaware
- Making a gift that will provide me (or someone I designate) income for life
- Making a gift that may save state taxes while passing assets to my family
- Scheduling a program on planned giving and OperaDelaware

Please call us or return this form to:

Carin Brastow
OperaDelaware
PO Box 432
Wilmington, DE 19899
FAX: #302/658-4991

THANK YOU FOR YOUR INTEREST IN SUPPORTING OPERADELAWARE'S FUTURE.
IF YOU HAVE ANY QUESTIONS,
PLEASE CALL CARIN BRASTOW AT #302/658-8063 ext.3260.