

Barre Center for Buddhist Studies

149 Lockwood Road
Barre, MA 01005



(978) 355-2347
www.dharma.org

PLANNED GIVING RESPONSE FORM

Name _____

Address _____

City _____ State _____ Zip _____

E-mail _____ Telephone _____

I would like to receive information
on supporting BCBS through my:

- Will
- Retirement Plan
- Life Insurance
- Securities
- Gift Annuities
- Living Trust
- Charitable Remainder Trust

I have already named BCBS as a
beneficiary of my estate through my:*

- Will
- Retirement Plan
- Life Insurance
- Securities
- Gift Annuities
- Living Trust
- Charitable Remainder Trust

**Although it's not necessary to let us know
about your bequest, it helps BCBS's long-
term planning to be aware of your gift.*

Please call me. The best time to reach me is _____.

Notes: _____

Please return this form to: Sumi Loundon, c/o BCBS, 149 Lockwood Rd, Barre, MA 01005.
If you have further questions, please contact Sumi at (978) 355-2347 or SumiL@dharma.org.