



SPECIAL PURPOSE ENTITY WAIT LIST INTENT FORM

INVESTOR INFORMATION:

Please print name	Spouse's name
Mailing address	
Phone number	Email address
Today's date	

ACCREDITED INVESTOR CRITERIA (must check one):

[] Income Test: My individual income exceeded \$200,000 in each of the two most recent years or my joint income together with my spouse exceeded \$300,000 in each of those years;
and
I reasonably expect to earn individual income of at least \$200,000 this year or joint income with my spouse of at least \$300,000 this year.

[] Net Worth Test: My individual net worth, or my joint net worth together with my spouse, exceeds \$1,000,000.

DESIGNATION:

Please apply my contribution as follows (check election):

☐ Unrestricted, our area of greatest need.

☒ Restricted to: Sacred Heart School, West Reading _____ %
Name of School

_____ %
Name of School

☐ Please allow 10% of my gift to be applied as Unrestricted.

\$ _____ **TOTAL CONTRIBUTION AMOUNT PER YEAR** (\$5,000.00 minimum)



Thank you for restricting your contribution to Sacred Heart School!