



Office of Gift Planning and Endowments

ESTATE GIFT INTENTION FORM

So that we may properly thank you and acknowledge your future gift to UMSL, please complete the following information about your future gift.

| | | | |
|--------------------------------|------------------------|--------------------------------------|------------------------|
| _____ Name | _____ Date of birth | _____ Spouse Name (if applicable) | _____ Date of birth |
| _____ Mailing Address | | _____ City, State Zip | |
| _____ Telephone (residence) | | _____ Telephone (business) | |

TYPE OF GIFT

Will
 Living Trust
 Life Insurance
 Retirement Plan
 Other: _____

DESCRIPTION OF GIFT

Please describe the nature of your gift to UMSL (for example – percentage of estate, specific dollar amount, description of specific property, etc.)

As of today’s date, I estimate the value of this provision in my estate plan to be \$ _____

This is a “contingent” gift (UMSL is an *alternate* beneficiary and will only receive the gift under certain circumstances.) Please describe the contingent arrangements:

PURPOSE OF GIFT

This is an unrestricted gift.
 This gift is to be used for the following purpose or program:

I/We understand that this is not a legal or binding commitment on my/our estate. UMSL should understand that the size of this future gift may be significantly different from the amount estimated above. If for any reason in the future UMSL is no longer included in my/our plan, I/we will notify you so that you can update your records. I/We understand that any gift received by UMSL from my/our estate shall be subject to UMSL fee assessment policies in effect at the time.

| | | | |
|--------------------|---------------|--------------------|---------------|
| _____ Signature | _____ Date | _____ Signature | _____ Date |
|--------------------|---------------|--------------------|---------------|

PLEASE RETURN TO: