

Planned Gift Intention Form

Person	nal Information:	
Name:	:	
Spouse	e's Name:	
Addres	ess:	
Home	Phone:	Cell Phone:
Email a	address:	
Date o	of Birth:	Spouse's Date of Birth:
Tl	his is a joint gift with my spouse (n	amed above)
name a	as a member of the 1922 Legacy Soc	, , ,
0	I/we wish to be recognized in the	: 1922 Legacy Society.
0	I/we wish to remain anonymous.	
I/we ha	nave named MSU as a beneficiary of	my:
0	Will	
0	Charitable Trust	
0	Living Trust Life Insurance Policy	
0	Retirement Account	
0	Other:	
Does y	Yes	a spouse) before Midwestern State University?
0	No	

If so, does that person have a similar gift provision?

YesNo

	Exact Language of Provision (Write in space below or attach a copy)		
Value of Provision			
(For percentages/remainders of an of form is signed)	estate, provide a good faith estimate of the dollar value as of the date this		
A	Area(s) of the university to be supported		
	(Designation)		
ı			
gnature:	Date:		
ignature:	Date:		

We recognize that values of deferred gifts as well as the provisions themselves may change over time. Your signature verifies only that the above information is accurate as of this date and does not represent a binding commitment to the university. Should you ever update your gift plans, we suggest directing your gift to the Midwestern State University Foundation to ensure it is administered in the best manner possible.