

# COLGATE UNIVERSITY

Thank you for notifying Colgate that you have made estate plans, trust arrangements, or completed a beneficiary designation that includes the university. Thank you for giving back through your deferred gift. We are forever grateful.

## Statement of Deferred Gift Provision (Confidential)

\_\_\_\_\_  
Name(s) and Class Year

\_\_\_\_\_  
Date

*In appreciation of Colgate University and with the desire to contribute to its continued strength and success, I/we have executed and, barring unanticipated changes in circumstances, intend to keep in effect a valid provision in my/our estate for Colgate University.*

A conservative estimate of the current value of my/our provision is \$ \_\_\_\_\_. Please describe your provision (dollar amount, percentage of estate/residual, description of gift property): \_\_\_\_\_

*My/Our provision is made through the following: (Provide advisor(s) and attorney contact information on back.)*

### BEQUEST

- Bequest in a will (revocable)
- Bequest in a living trust
  - I/We retain right to change beneficiaries
  - Colgate University is an irrevocable beneficiary

### BENEFICIARY DESIGNATION FORM

- Retirement plan assets (please provide copy of statement)
  - Colgate University is primary beneficiary
  - Colgate University is contingent beneficiary

### LIFE INSURANCE

- Colgate University is primary beneficiary
- Colgate University is contingent beneficiary

*My/Our estate provisions shall be used by Colgate University for:* \_\_\_\_\_

No designation

(General description of use)

*I/We understand that, with the exception of any irrevocable estate provisions made, I/we can revise these plans if circumstances warrant. I /we also understand that Colgate may rely on my/our provision in its future planning; therefore I /we will inform Colgate University if my/our intentions change.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Colgate University may publicly acknowledge this commitment:  Yes  No

## CONTACT INFORMATION

**Attorney:** \_\_\_\_\_

Firm name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

**Executor:** \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

**Financial advisor/Institution:** \_\_\_\_\_

Contact person: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

**IRA administrator/Institution:** \_\_\_\_\_

Contact person: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

**Life insurance company:** \_\_\_\_\_

Agent: \_\_\_\_\_

Policy number: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_