

Confidential Gift Plan Information

Indication of Planned Gift

I have made provisions for a gift to the Western Washington University Foundation in my estate plan:

- | | Estimated Current Value: |
|--|--------------------------|
| ? Will | \$ _____ |
| ? Beneficiary of life insurance policy | \$ _____ |
| ? Beneficiary of IRA or other deferred account | \$ _____ |
| ? Beneficiary of a trust: | |
| 1. Revocable beneficiary | \$ _____ |
| 2. Irrevocable beneficiary | \$ _____ |
| ? Gift Annuity | \$ _____ |
| ? Other (please describe) | \$ _____ |

Please assist the Western Washington University Foundation and Western Washington University by providing information about your intended future gift. Please attach a copy of your will(s) or trust(s), or copies of those pages describing the gift, along with the first and last pages of the document. For insurance gifts, please provide a copy of the policy and beneficiary form. For gifts from an IRA or other deferred account, please provide a copy of the beneficiary form. All gifts should be directed to the Western Washington University Foundation, Bellingham, Washington. The Foundation was founded in 1953 to accept and manage all private gifts for Western Washington University.

WWU Old Main Society

Many of us desire to pass on the opportunities WWU has given us. The WWU Old Main Society recognizes those who answer that call. By using innovative gifting plans to ensure future gifts, the WWU Old Main Society members are displaying their belief in the enduring value of Western. By providing information on your planned gift, you become an honoree of the WWU Old Main Society. The foundation will keep the details of your gift confidential, and you are welcome to decline public recognition. However, public recognition is encouraged so you may be an encouragement and inspiration to others.

- ? You may publish my name as a Member of the WWU Old Main Society.
 My name should be listed as follows: _____
- ? Please do not publish list my name as an honoree of the WWU Old Main Society.

Name(s) _____

Address: _____ City, State, Zip: _____

Telephone: _____ Email: _____

Date(s) of birth: _____

Signature(s): _____

Date: _____