Legacy Society Gift Form



Route to: MSUM Foundation | Attn: Accounting | Owens 215A | 1104 7th Ave S. Moorhead, MN 56563

DONOR INFORMATION Please print. Name(s) City, State, Zip Home phone _____ Cell phone _____ Work phone ____ Spouse's signature (if applicable) Date As an honored member of our Legacy Society, we will include your name(s) in various publications as printed above. *If you would prefer <u>not</u> to have your name printed, please check here \square . TYPE OF GIVING I/We accept membership in the Legacy Society and qualify on the following basis: ☐ I/We have included MSUM in my/our Will or Living Trust. ☐ I/We have established a Life-Income Plan with MSUM. ☐ I/We have a Qualified Retirement Plan or an Insurance Policy naming MSUM as a beneficiary. ☐ I/We have made Other Estate Provisions for MSUM. Please describe: **DESIGNATION** This commitment, when it becomes available, is for: ☐ Unrestricted gift to be used in such a manner as the college determines. ☐ To benefit the following program: _____ **DONOR INTENTION** ☐ I/We have included MSUM in our estate for _______%. As of today's date, the approximate value is \$ ______. ☐ I/We have made a specific bequest of \$_____ to MSUM. If you have any questions, please contact Mark Hensrud, CFRE at mark.hensrud@mnstate.edu or call 218-477-4226. We hope you will share the approximate percentage/amount of your gift with us so the university will know of your generosity and be able to recognize you appropriately. The supporting documentation would also be helpful to us. Such documents might include a copy of the relevant pages(s) of your will or beneficiary form. Please attach if possible. Gifts are subject to policies as approved by the MSUM Foundation. This is not a legally binding contract. It is recommended that you

Tax ID: 23-7101061

seek professional legal and financial advice from your own team of professionals.