



## Kansas Wesleyan University ~ Statement of Testamentary Provision

***NOTICE TO DONOR: We deeply appreciate your support and understand the confidentiality of this information. Every attempt will be made to comply with your wishes. This information is for planning purposes only. We appreciate the opportunity to measure the level of our future budgetary commitments to serving the needs of Kansas Wesleyan University.***

As an indication of our (my) support for Kansas Wesleyan University, we (I) certify that we (I) have made an estate provision as follows:

### **DESCRIPTION OF ESTATE PROVISION**

#### **1. To which of the entities is the gift intended (You may identify more than one)**

Kansas Wesleyan University

Kansas Wesleyan University Foundation Endowment

Further Description:

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#### **2. Gift Through Will or Trust**

- Bequest of specific property or amount. Description: \_\_\_\_\_
- Bequest of percentage of estate (please indicate percentage \_\_\_\_\_%.)
- Bequest of Charitable Unitrust or a Charitable Annuity in my will/trust.
- Bequest to my spouse, then to Kansas Wesleyan University.
- Bequest to my children or others, then to Kansas Wesleyan University.

Further Description of Gift:

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#### **3. Gifts that provide life income, administered by another financial institution:**

- Charitable Unitrust/Annuity Trust
- Charitable Gift Annuity
- Deferred Gift Annuity

Further Description of Gift (unitrust or annuity manager, type of trust or annuity):  
\_\_\_\_\_

**4. As beneficiary of a Life Insurance Policy/Retirement Plan:**

Policy Number \_\_\_\_\_

Company \_\_\_\_\_

Type of Policy/Plan \_\_\_\_\_

Further Description of Gift: \_\_\_\_\_

**5. Payable/Transfer on Death of CDs, Bonds, Mutual Funds, etc....**

Policy Number \_\_\_\_\_

Company \_\_\_\_\_

Type of Policy/Plan \_\_\_\_\_

Further Description of Gift: \_\_\_\_\_

With the understanding that values are subject to change, at this time we expect the value of our future provision to be approximately:

\_\_\_\_\_ \$

We appreciate notice of any changes in the prior stated provisions that might be made in the future.

DESIGNATION OF FUTURE GIFT(S) TO KANSAS WESLEYAN UNIVERSITY:

Our (My) Gift is unrestricted and may be used where the need is greatest.

We (I) have specified the future gift to be used for the following purpose:

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Attachments or letters that further describe the previous listed provision(s) are encouraged. In particular, a copy of the section of your will, trust agreement, or other document containing the provision(s) will be appreciated. A photograph of yourself and brief biography would also be greatly appreciated.

COMMUNICATION AUTHORIZATION

We (I) authorize this information to be shared internally among the following entities as necessary: Kansas Wesleyan University Foundation, Kansas Wesleyan University Office of Institutional Advancement, Chief Financial Office, and Office of the President.

SIGNATURES OF DONORS

_____	_____
Name	Name
_____	_____
Social Security No. (Optional)	Social Security No. (Optional)
_____	_____
Date of Birth	Date of Birth
_____	_____
Date	Date

Please return completed form to:

Kansas Wesleyan University  
Office of Institutional Advancement  
100 East Claflin  
Salina, KS 67401  
785-827-5541