

Dear Donor,

We realize that many people who plan to support Wellesley College through their estate and/or financial plans prefer to keep their intentions private. However, by letting us know of your plans, we can thank you during your life, and confirm that we are able to fulfill your stated intentions.

Please know that completing this form is non-binding — we understand that you may change your plans at any time. Please also know that all information you share with us is kept strictly confidential.

Office of Gift Planning Wellesley College Phone: 781-283-2235 Email: giftplanning@wellesley.edu

Planned Gift Notification- Confidential

Personal Information

Name:			
Spouse Name:			
Address:			
City:	State:	Zip:	
Phone:	Email:		
Date(s) of Birth:			

Your Gift Intention

Please provide the following information and attach a copy of the documentation or appropriate language from your will or trust, if available. Please complete all that apply.

I/We want to below:	support the mission of Well	lesley College through a planned gift as described
I/We ha	ave included a bequest for W	/ellesley in my/our will or living trust.
☐ I/We ha	ave named Wellesley as a be	eneficiary of an asset:
	etirement Plan	Bank, Investment, or Other Financial Account
		Other:
	· · · · · ·	vocable/irrevocable <i>(circle one)</i> beneficiary of a
	ble remainder trust.	
		e approximately \$ or% e a copy of the bequest language or other wording
-		gift provision (such as, asset to be donated if other ed, whether gift is to create an endowment, etc.):
🗌 Yes, you ma	ay include me/us in listings o	f planned gift donors.
		me(s) to appear in our Wellesley Legacy Society ended gift will not be published):
No, please o	do not include me/us in listin	gs.
Signature(s):		
Date:		
		Return form to: Office of Gift Planning
		Wellesley College
		106 Central St., Wellesley, MA 02481

Phone: 781-283-2235

Email: giftplanning@wellesley.edu