

Dear Friend,

We realize that many people who plan to support New 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.

Declan J. Sheehy Director of Philanthropy New College Foundation Phone: 941-487-4674 Email: dsheehy@ncf.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 support the mis described below:	sion of New College Foundation throu	gh a planned gift as
I/We have included a be	equest for New College in my/our will c	or living trust.
I/We have named New 0	College Foundation as a beneficiary of	f an asset:
Retirement Plan	Bank, Investment, or Othe	er Financial Account
Life Insurance Poli	icy Other:	
I/We have named New (beneficiary of a charitab	College Foundation as a revocable/irre le remainder trust.	evocable (circle one)
	gift is/will be approximately \$ ease include a copy of the bequest lan	or% guage or other wording
	otion of the gift provision (such as, ass is to be used, whether gift is to create	
Please indicate how you would li	in listings of planned gift donors. ike your name(s) to appear in our the <i>note the amount of your intended gift</i>	
No, please do not include me		
Signature(s):		
Date:		
	Return form to: Declan J. Sheehy	/

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