

Planned Gift Form

Future commitments, such as intended bequests and beneficiary designations, play a critical role in ensuring excellence at WVSOM for generations to come. The WVSOM Foundation, in partnership with WVSOM, seeks to recognize your generous commitment and work with you to ensure your philanthropic intentions are met.

We kindly ask that you provide us with the following information	tion:
Name:	Birthdate (MM/DD/YYYY):
TO THE WVSOM FOUNDATION (IF APPLICABLE).	MENT (WILL/TRUST) OR BENEFICIARY DESIGNATION
Type of gift: Estate Life insurance Cha	aritable remainder trust Retirement account
Recommended language: "I leave (Percent of estate, dollar amount, residue) to the WV (Tax ID 51-0163180) located in the state of West Virginia, to s We encourage you to contact us to further designate your estates and the state of the stat	support (program/need/endowment/unrestricted fund)." state provisions for a specific purpose.
Estimated value of your estate commitment:	
If the bequest is included as part of your spouse's/life partr surviving spouse/partner, please provide copies of your spo	ner's estate plan and will not be realized until the death of the buse's/partner's documents.
Spouse's/partner's name:	
Spouse's/partner's birthdate (MM/DD/YYYY):	
I wish for this gift to remain anonymous. I understand the	nat this gift will not be listed in any institutional publications.
Signature:	Date:
Spouse's/partner's signature:	Date:
	el your gift plans. The "estimated value" of your future gift is in no way will help us accurately administer your gift and ensure that your wishes ential files with the WVSOM Foundation Inc.

Return form to:

WVSOM Foundation Attn: Donette Mizia 400 Lee Street North Lewisburg, WV 24901



Visit: wvsomfoundation.org

Follow us: WVSOM Foundation

Andrew Ickes
Development director
P: 304.647.6374
F: 304.647.6211
aickes@osteo.wvsom.edu