



SALISBURY UNIVERSITY FOUNDATION, INC.

CONFIDENTIAL STATEMENT OF BEQUEST PROVISION

Bequest gifts have played a central and critical role in the evolution of Salisbury University. A significant number of our alumni and friends have chosen this personal way of being permanently identified with the institution to which they are so loyal. We, therefore, urge you to take action in your estate planning if you have not already done so and to share this information with us in confidence as evidence of your continued faith and support.

When completed, the **Confidential Statement of Bequest Provision** should be returned to the Salisbury University Foundation, Inc.; 1308 Camden Avenue, Salisbury, MD 21801.

For further information concerning bequest provisions or gift planning options contact:

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Salisbury University
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SALISBURY UNIVERSITY
CONFIDENTIAL STATEMENT OF BEQUEST PROVISION

Please print or type:

Name: _____ Birthdate: _____

Mailing Address: _____

TYPE OF PROVISION

ESTIMATED AMOUNT

I have made provisions for the Salisbury University Foundation, Inc. in my estate plan as follows:

- | | | |
|----|---|----------|
| a. | Outright bequest in my Will | \$ _____ |
| b. | Provision in my Will of _____% of the remainder of my estate. I estimate the current value for Salisbury University Foundation, Inc. to be: | \$ _____ |
| c. | Provision in the Wills of the survivor of my spouse and myself (please give spouse's birthdate) _____ | \$ _____ |
| d. | Trust under my Will with Salisbury University Foundation, Inc. as the final beneficiary (please include birthdates or ages of income beneficiaries, or describe other conditions): _____ _____ _____ | \$ _____ |
| e. | Other (please describe): _____ _____ _____ _____ | |
| f. | If this provision is restricted to a specific area(s) within Salisbury University, please specify: _____ _____ | |

[Attachments or letters which further describe the nature of the above provision(s) are welcomed. Also, the section of your Will, Trust Agreement or other documents pertaining to said provisions(s) would be appreciated, though not required.]

So that we may encourage others to follow your lead, we would like your permission to list your name, among others who have done likewise, in future Salisbury University publications. No amounts would be mentioned.

_____ You may print my name as one who has included Salisbury University in my estate plans.

**How would you like your name to appear on our Holloway Society recognition wall? i.e. John and Margaret Jones, John Jones Family, Margaret A. Jones, etc.

_____ Please do not print my name

I agree to notify the Deputy Director of the Salisbury University Foundation, Inc. of any relevant changes in my estate planning.

(Date)

(Signature)