



Statement of Future gifts for Hampton University

Donor Name

Date of Birth

Spouse/Partner Name (If Joint Gift)

Date of Birth

Donor Address

Email Address

Gift Information:

I have made a provision to benefit Hampton University

- Outright bequest payable upon my death directly to Hampton University.
- Provision in will of surviving spouse/partner payable to Hampton University.
- Beneficiary designee of a life insurance policy, IRA, pension plan, 401(k), or 403(b).
- Testamentary trust established at death, naming Hampton University as the beneficiary.
- Other: _____

Please attach a copy of the relevant language from your estate documents or other documentation confirming Hampton University has been designated as the beneficiary.

The estimated current value of my future gift to the University is \$ _____. However, it is understood that future fluctuations/changes in the market/economy may have an impact on this value.

Please direct the proceeds from my future gift as follows:

- Unrestricted gift to Hampton University.
- To benefit an existing fund. Fund Name: _____
- To create a new fund (If you wish to create a new fund, please contact the Office of Development to confirm that your gift meets the minimum endowment requirements).

Donor Recognition Preferences:

All donors of future gifts become members of the *Pillar Society*. To ensure your recognition preferences are honored.

Please select one of the below options:

- The University has my permission to publish my/our names(s) along with other *Pillar Society* members in the annual Honor Roll of Donors (as part of the Report to Donors) and other Hampton University publications as appropriate. Please publish my/our name(s) as follows: _____. **(No value will be printed or released without permission).**
- Please do not publish my/our name(s) in the annual Honor Roll of Donors or any other publications. Benefits of membership to the *Pillar Society* include, but are not limited to, Presidential acknowledgement, a *Pillar Society* welcome packet, and invitations to exclusive events. Please select one of the below options:

I would like to designate the following individual(s) as successor recipient(s) of any information relating to my gift:

Name: _____ Address: _____ Relation: _____

Name: _____ Address: _____ Relation: _____

DONOR SIGNATURE: _____

DATE: _____

Please return this form to the Office of Development, 200 William R. Harvey Way, Hampton, VA 23668

Thank you for your support of Hampton University