

RECORD OF ESTATE INTENTION

I HAVE MADE PROVISION FOR A GIFT IN MY ESTATE PLAN THROUGH A: O Beneficiary designation of my insurance policy O Bequest in my will O Beneficiary designation of my IRA or other account O Bequest in my trust for the University of Arkansas Foundation, Inc., to benefit the University of Arkansas, Fayetteville. THE ESTIMATED CURRENT VALUE OF MY GIFT IS \$ **GIFT DESIGNATION:** Please enter only what applies to your gift. O College, School or Unit ______ Department _____ O Other **GIFT PURPOSE:** O Unrestricted O Scholarship/Award O Faculty Support O Other Thank you for choosing to support the University of Arkansas! A gift agreement or other documentation may be requested; a planned giving officer may contact you to discuss the impact you want to make with your gift. DONOR INFORMATION & SIGNATURE(S): Second Life, if applicable Name Name Date of Birth _____ Date of Birth _____ Date signed Date signed Address Address Phone _____ Email _____ Phone _____ Email _____

PLEASE RETURN FORM TO:

Signature _____

Office of Planned Giving University of Arkansas 481 South Shiloh Drive Fayetteville, Arkansas 72704 Email: legacy@uark.edu

ESTATE GIFT QUESTIONS?

Signature _____

Contact Rachel Krest Executive Director, Planned Giving Mobile: 479-263-1405

Email: rachel@uark.edu