STATEMENT OF ESTATE OR DEFERRED GIFT COMMITMENT



As evidence of my/our desire to provide a legacy of support to North Carolina Agricultural & Technical State University, I/we hereby inform the University that I/we have made provisions for a gift to the University in my/our estate plans. I/we understand that this commitment can be modified by me/us at any time.

1. Gift Type

☐ Bequest through a will/trust ☐ Percentage of estate% or ☐ Specific amount \$		
☐ Other (please specify)		
☐ Charitable Trust (select one) Unitrust Annuity Trust Revocable Trust Lead Trust		
(Additional documentation may be required; please contact the Office of Gift Planning for information.)		
☐ Charitable Gift Annuity Current Deferred		
☐ IRA or Retirement Plan Primary Contingent Beneficiary		
☐ Other (please describe)		
☐ I/We have provided or will provide the University a copy of that portion of my/our will(s) or other instrument(s) that pertain to North Carolina A&T.		
2. Estimated Gift Value		
With the understanding that values are subject to change, I/we estimate the value of my/our gift to be approximately \$ in today's dollars. I/we understand that, by stating the amount, my/our estate is not legally bound by this statement, and I/we may choose to change or revoke this bequest at any time, at my/our sole discretion.		
3. Gift Designation		
 □ This gift is unrestricted and may be used where the need is greatest at North Carolina A&T. □ Please designate my/our gift for this specific purpose: 		
☐ This gift will create a new fund administered by the University.		
4. Gift Recognition		
□ Please include me/us in the Charles H. Moore Legacy Society and list my/our name(s) among those of other donors, without disclosure of the gift amount, in recognition pieces. Please list me/us as:		
☐ This gift should be considered as anonymous. Please list me/us as such in recognition pieces.		
☐ This gift should be considered confidential and, therefore, please do not list me/us in recognition pieces.		

5. Contact Information

Name	Spouse/Partner's Name
Class Year(s) Birthdate	Class Year(s) Birthdate
Wedding Anniversary	
E-mail	E-mail
Address	Address
City/State/ZIP	
Home Phone	Home Phone
Employer Name	Employer Name
Business Title	Business Title
Bus. Address	Bus. Address
City/State/ZIP	City/State/ZIP
Bus. Phone	Bus. Phone
Donor Signature	Date
Donor Signature	Date

Thank you for your support of North Carolina A&T State University.

The University and its employees do not provide tax or legal advice.

Prospective donors should consult their legal and financial advisors.