

## COMMUNITY, CREATIVITY, CONNECTIVITY.

## **Confirmation of your Planned Gift**

I/We, the undersigned, have included Oklahoma City University in our will, revocable living trust, or through other deferred giving, and offer the following description of the gift within this form for the confidential use of University Advancement.

Name:		Date of Birth:	
Spot	use Name (if applicable):	Date of Birth:	
Mail	ing Address:		
City:	:	State: Zip Code:	
Phone Number:		(cell / home) Email:	
Des	scription of Gift		
	Type of Gift	Today's Value of OCU's Share	
	□ Will	\$	
		\$	
		\$	
		\$	
		\$	
I/We understand this is not a legal or binding commitment on my/our estate. OCU should of this future gift may be significantly different from the amount estimated above. If for an OCU is no longer included in my/our plan, I/we will notify you so you can update your reco		ly different from the amount estimated above. If for any reason in the future	
	☐ If OCU is an alternate beneficiary and will only receive the gift under certain contingencies, please check. If you checked this box, please describe the conditions under which OCU would receive this gift: This box should only be checked if OCU is truly an alternate beneficiary, for example, when all primary beneficiarie to your estate would have to predeceased you, or forfeit any claims to your estate before OCU would receive any distribution from your estate.		
Pur	pose of Gift		
<b>□</b> T	his is an unrestricted gift to Oklahoma City	University.	
<b>T</b>	his is an unrestricted gift to	Oklahoma City University, Oklahoma City, Oklahoma.	
□ T		ose or program:	
		evocable living trust or beneficiary designation form is attached description of gift page(s) and signature page).	
Sign	ature:	Date:	
Sign	ature:	Date:	

## Please return to: