



DECLARATION OF INTENT

DONOR INFORMATION

Full legal name(s): _____ DOB: _____

Street address: _____

City/State/Zip: _____

Phone number: _____ Email address: _____

DONOR RECOGNITION

[] Yes, you may recognize me/us in donor lists. Please list my/our name as follows:

[] I/We prefer to remain anonymous during our lifetimes, but you may recognize me/us after my/our gift matures.

[] I/We prefer to remain anonymous.

DESCRIPTION OF GIFT

[] Will/Living Trust Percentage of estate _____ % or specific amount \$ _____

[] IRA/Retirement Plan [] Charitable Remainder Trust [] Donor Advised Fund

[] Life Insurance policy [] Charitable Gift Annuity [] Other _____

PURPOSE OF GIFT

This gift is to be unrestricted and may be used where the need is greatest at WXXI.

I/We wish to specify that this gift be used to support the following program(s) or purpose(s):

This Declaration of Intent is an expression of my/our present plans and is subject to change or modification. If changes are made, I/we will notify WXXI.

Signature and Date: _____

Signature and Date: _____