

Amherst College Bequest Recognition Form

(Confidential)

Name(s)	Class Year	Date
In appreciation of Amherst College and with the desire to con have executed and intend to keep in effect a provision in my/o		•
A conservative estimate of the current value of my/our provis	ion is \$	

Attached is a copy of the relevant document naming Amherst College as primary beneficiary

For example, the page of your will or trust mentioning Amherst College, the beneficiary form from your life insurance or retirement plan.

My/our provision is made through the following planned gift:

BEQUEST

□ Bequest in a will

TRUST

- □ Bequest in a living trust
- □ Charitable remainder trust
- □ Charitable lead trust

OTHER

- \Box Retirement plan assets [e.g., IRA, 401(k), 403(b)]
- □ Life Insurance
- □ Other _____

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All bequest documentation will be kept in strictest confidence.

On occasion, names of donors who have documented bequests may be listed in College reports or shared with class leadership. No bequest dollar amount will be directly associated with a donor's name. Documented bequest dollar amounts will be aggregated and included in overall class totals at reunions.

Please state your preference:

Signatura

- □ I/we give Amherst College permission to publish my/our name(s) in College reports and share with class leadership as having documented a bequest intention for the College and have our bequest intention figure included in aggregate totals.
- □ I/we prefer for this gift to be anonymous in that my/our name(s) will never be published in any College reports or shared with class leadership as having documented a bequest intention for the College however, I/we wish that my/our bequest intention figure be added to aggregate totals.
- □ I/we prefer for this gift be totally anonymous, such that our names will never be published or shared with class leadership in connection with bequest intentions and my/our bequest intention figure will NOT be included in aggregate totals.

Data

If my intentions change, I/we will inform the College.

Signature		Date
Signature		Date
	Please return this form and relevant documents to:	
	Inlia D. Lookman, I.D.	

Julie R. Lackner, J.D. Director of Gift Planning Amherst College PO Box 5000 Amherst, MA 01002-5000