

CONFIDENTIAL STATEMENT OF BEQUEST

Date: _____ Name(s): _____

Mailing Address: _____

Email Address: _____

Phone Number: _____ Alternate Phone: _____

Constituent info: Alumnus/a (Class: _____) Parent Friend F/S Trustee

I / We have made the following bequest through my will or revocable trust to Wofford College:

Current Est. Value

This gift is for a specific dollar amount _____

This gift is for percentage of my estate (_____ %) _____

This gift is for the remainder of my estate _____

Designation of gift*: _____

Execution date of will / trust: _____

Attorney of record: _____

Attorney address and phone: _____

Executor of estate: _____

Executor address and phone: _____

Exec. Relation to you: _____

I have attached a photocopy of the relevant portion of my will or revocable trust.

**If you wish to create a new fund, you are encouraged to speak with a member of the college Development staff to ensure that any fund you establish is in accordance with Wofford's gift acceptance policy and that the fund is used according to your intent.*

Benjamin Wofford Society

Your bequest to Wofford qualifies you as a member of the Benjamin Wofford Society. With your permission, we would like to recognize your significant gift on the college website, in publications and in a central campus location.

Name(s) as you would like them listed: _____

Please keep this gift anonymous

This is not a binding legal document. Your signature(s) simply verifies that you believe this information is correct at this time. Wofford College recognizes that the value of a bequest may change over time. Please notify us of any future changes to this plan.

Signature(s): _____ Date: _____



Please direct questions to:

Lisa De Freitas

Director of Gift Planning

864-597-4203

defreitaslh@wofford.edu

Please return the completed form to:

Wofford College / Office of Gift Planning

429 N. Church Street / Spartanburg, SC

29303-3663