

## Washington and Lee University Revocable Bequest Recognition Form

(Confidential)

Name(s)	Class Year	Date
In appreciation of Washington and Lee Univer have executed and intend to keep in effect a pre-	•	
A conservative estimate of the current value of	my/our provision is \$	
For example, the page of your will or t	document naming Washington and trust mentioning Washington and Lee, th	
life insurance or retirement plan.		
My/our provision is made through the follow	owing planned gift:	
	owing planned gift:  TRUST	
My/our provision is made through the follo		iving trust
My/our provision is made through the followard BEQUEST	TRUST	
My/our provision is made through the followard BEQUEST	TRUST  Bequest in a li	mainder trust
My/our provision is made through the followard BEQUEST	TRUST  Bequest in a li Charitable ren	mainder trust
My/our provision is made through the followard BEQUEST  Bequest in a will	TRUST  Bequest in a li Charitable ren Charitable lea	mainder trust
My/our provision is made through the followard BEQUEST  Bequest in a will  OTHER	TRUST  Bequest in a li Charitable ren Charitable lea	mainder trust

Continued on back

All bequest documentation will be kept confidential in accordance with the university's policies, procedures, and practices.

On occasion, names of donors who have documented bequests may be listed in university 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.

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Please	state	vour	preference	۰
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	I/we give Washington and Lee permission to publish my/our name class leadership as having documented a bequest intention for the ufigure 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 university reports or shared with class leadership as having documented a bequest intention for the university—however, I/we wish that my/our bequest intention figure be added to aggregate totals.				
If my in	ntentions change, I/we will inform the university.				
Signatu	are	Date			
Signatu	ure	Date			

Please return this form and relevant documents to:

Jacqueline Painter
Director of Gift Planning
Washington and Lee University
204 W. Washington Street
Lexington, VA 24450