

A bequest gift to Babson College is a wonderful way to leave a legacy and be acknowledged during Babson's Centennial Year 2019. Please complete this form to ensure that your gift intentions are appropriately recognized and fulfilled. The information you provide below will be kept confidential.

Thank you for including Babson College in your estate commitments.

TYPE OF GIFT			
I have included Babson College in m	y:		
☐ Bequest/will/estate plan	□ Retirement plan	☐ Charitable remainder trust	 □ Brokerage or savings account
☐ Life insurance policy	☐ Living trust	☐ Charitable lead trust	□ Other
BABSON LEGACY SOCIETY RECOGNI Babson is proud to recognize you as	TION a member of the Babson Legacy Society.		
□ Please include me in the Babson Legacy Society.	☐ My spouse is joining me. ☐ I/we pro		to remain anonymous.
DOCUMENTATION			
☐ Attached is a copy of the document that names B	e bequest provision, relevant portion(s) of labson as a beneficiary.	f my/our will or estate-plan provisio	n, or beneficiary-designation
VALUE • Percentage of estate	or account %	Estimated current & value of the 9/	
	or account % I It to bequeath \$		
AREA OF SUPPORT I/we wish to bequeath this gift to Ba			
	annual unrestricted budget.		
☐ Current use support for	<u> </u>	(Example: Financial aid, faculty	support, and/or student life.)
☐ Add to my existing nam	ed fund		·
☐ Support to unrestricted	d endowment. Babson understands that gift intentio	ns can change based on unexpected	l life events.
Donor Name		List as	
Donor Signature		Date	
Date of Birth		Preferred Phone	
Joint Donor Name		List as	
Joint Donor Signature		Date	
Date of Birth			
THE PERSON WHO WILL HANDLE M	Y ESTATE AFFAIRS (EXECUTOR OR PERSO	ONAL REPRESENTATIVE) IS:	
Name			
Address			
Telephone			
Print Name			
Signature	Date		

