

# WAMU 88.5

AMERICAN UNIVERSITY RADIO

## CONFIRMATION OF YOUR LEGACY GIFT

This form is to assist you in providing information about your future gift to WAMU 88.5 American University Radio. By completing this form, you help ensure your gift will be used as you intended. This document is not considered to be a legal or financial obligation and will be kept confidential.

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Date(s) of Birth: \_\_\_\_\_

Email(s): \_\_\_\_\_

### DESCRIPTION AND VALUE OF GIFT

I/We have included WAMU 88.5, American University Radio, in my/our estate plans through one or more of the following planned gifts:

- |  |   |
|--|---|
| <input type="checkbox"/> Will or Living Trust                | <input type="checkbox"/> Charitable Lead Trust        |
| <input type="checkbox"/> Retirement Plan (Beneficiary)       | <input type="checkbox"/> Charitable Remainder Trust   |
| <input type="checkbox"/> Life Insurance Policy (Beneficiary) | <input type="checkbox"/> Other (Please Specify) _____ |

Percentage Allocated: \_\_\_\_\_ Approximate Value of Gift: \$ \_\_\_\_\_

OR

Outright Bequest (specific dollar amount): \$ \_\_\_\_\_

### DESIGNATION OF COMMITMENT TO AU

- ☐ Unrestricted to WAMU 88.5 \_\_\_\_\_
- ☐ Restricted to: \_\_\_\_\_

### RECOGNITION

- ☐ Please list me/us as member(s) of WAMU 88.5's **1961 Society** as follows:

- ☐ I/We wish for this gift intention to be anonymous.

**Unless indicated otherwise, this commitment is revocable and can be modified by me/us at any time.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### PLEASE RETURN FORM TO:

Eliza Saunders • Office of Planned Giving • WAMU 88.5, American University Radio  
PO Box 98101, Washington, DC 20090-8101 - 202-885-8904 • esaunders@wamu.org