



# MACVITTIE LEGACY SOCIETY PLANNED GIFT PLEDGE FORM

The Robert W. MacVittie Legacy Society recognizes those benefactors who have provided for the future of SUNY Geneseo in their estate plans or made other planned giving arrangements which benefit the College.

In support of SUNY Geneseo, I/We intend to provide a gift to the Geneseo Foundation through my/our estate as detailed below. *In order to properly acknowledge and record your gift, please provide the following information about your estate plan.*

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Spouse/Partner \_\_\_\_\_ Date of Birth \_\_\_\_\_

Street Address \_\_\_\_\_ Phone \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

E-mail of Professional Advisor(s) \_\_\_\_\_ Phone \_\_\_\_\_

### TYPE OF GIFT

It is my/our intent to provide a legacy to SUNY Geneseo through my/our:  Bequest  Retirement Plan Assets  
 Charitable Remainder Trust  Life Insurance Policy  Other

### DESCRIPTION OF GIFT

Please describe the nature of your gift (for example – percentage of estate, specific dollar amount, description of specific property, etc.) \_\_\_\_\_

I/we wish to inform SUNY Geneseo, for long-term planning purposes only, the value of my/our gift, as of today, is \$\_\_\_\_\_ \* (If your gift is a percentage of your estate, please indicate the approximate present value of that percentage.) I/we understand that by stating an amount, this statement does not legally bind my/our estate, and I/we may choose to add, subtract, or revoke this bequest at any time, at my/our sole discretion.

### PURPOSE OF GIFT

Area of greatest need  This gift is to be used for the following purpose or program: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

It is understood that these statements and estimates are offered solely to assist SUNY Geneseo to record and project future financial support and gift expectancies. This information is confidential and is for informational purposes only and not binding on your estate or any individual.

- A copy of the provision is attached or will be sent when it is executed.
- SUNY Geneseo may announce and/or publish the gift as a way of encouraging others to join in supporting the College.
- My/our name may be identified with this gift for internal gift reporting only.
- I/we would like this planned gift to remain totally anonymous.

Signature of Donor \_\_\_\_\_ Date \_\_\_\_\_ Signature of Donor \_\_\_\_\_ Date \_\_\_\_\_

Executive Director, Geneseo Foundation \_\_\_\_\_ Date \_\_\_\_\_

*Thank you for your support and commitment. Mail or fax to:*  
Geneseo Foundation, Doty Hall 236, SUNY Geneseo, 1 College Circle, Geneseo, NY 14454  
Phone: (585)245-5518, Fax: (585)245-5514, Email: [advance@geneseo.edu](mailto:advance@geneseo.edu)