

Declaration of Intent

Membership in the Council Oak Society is reserved for those who have confirmed that they have made a provision in their estate for the University of Wisconsin-Eau Claire Foundation, Inc.

As an expression of my/our commitment to the University of Wisconsin-Eau Claire, I/we have made estate provisions to support the UW-Eau Claire Foundation through:

- | | | |
|--|---|--|
| <input type="checkbox"/> Will | <input type="checkbox"/> Charitable Remainder Trust | <input type="checkbox"/> Other (please describe) _____ |
| <input type="checkbox"/> Trust | <input type="checkbox"/> Charitable Gift Annuity | _____ |
| <input type="checkbox"/> Pooled Income Fund | <input type="checkbox"/> IRA or Other Retirement Assets | _____ |
| <input type="checkbox"/> Life Insurance Policy | | _____ |

In the approximate amount of \$ _____ (confidential)
Percentage _____ (confidential)

Other (please describe) _____

- I/We have included a copy of the portion of my/our estate document that names the University of Wisconsin-Eau Claire Foundation as a beneficiary. I/We understand it will be kept in a confidential file.
- I/We give permission to list my/our name(s) as (a) member(s) of the Council Oak Society with the understanding that the amount of my/our arrangements will be strictly confidential. Please enter my/our name(s) as: _____ (Name(s) as you wish for our records).
- Although the University of Wisconsin-Eau Claire Foundation is currently included in my /our estate, I/we do not wish to be in the Council Oak Society, listed on the honor roll, or prefer to be listed anonymously.

I/We wish to direct my/our support to:

- _____

This Declaration of Intent is an expression of my/our present plans and is subject to change or modification by me/us. If changes are made, I/we will notify the UW-Eau Claire Foundation.

Date

Signature

Date

Signature

The undersigned, being a duly authorized officer of the UW-Eau Claire Foundation, does hereby accept this gift.

Foundation Officer Name

Foundation Officer Signature

Date _____