CUESTA COLLEGE

Foundation

Building Bright Futures, Together.

Dr. Barbara H. George Legacy Society

I/we have provided support for the mission and goals of Cuesta College through a provision in my/our estate plans, and with this letter we are informing Cuesta College of our plans. I/we understand that this future commitment can be revoked or modified by me/us at any time.

DONOR INFORMATION

NAME _____ NAME _____

ADDRESS, CITY, STATE, ZIP _____

PHONE (HOME/CELL) _____ PHONE (BUSINESS) _____

EMAIL(S) _____

TYPE OF GIFT

I/we have made a provision to leave a legacy to Cuesta College through my/our:

- ☐ Will
- ☐ Retirement Plan or IRA
- ☐ Living Trust
- ☐ DAF
- ☐ Other _____

ESTIMATED GIFT VALUE

The estimated current value of my/our future gift to Cuesta College is:

$ _____

GIFT DESIGNATION

This commitment is to be used for:

- ☐ The area of greatest need
- ☐ The priority needs of _____ (DEPARTMENT/PROGRAM)
- ☐ I would like to create an endowment fund for: _____
- ☐ Other _____

GIFT RECOGNITION

- ☐ Please include me/us, without disclosure of amount, in the Dr. Barbara H. George Legacy Society. I/We would like my/our name(s) to appear as follows: _____ PLEASE PRINT NAME(S)
- ☐ I/we do not want my/our name(s) published and wish to remain anonymous in perpetuity.
- ☐ I/we do not want my/our name(s) published and wish to remain anonymous during our lifetime(s).

DATE _____ SIGNATURE _____ BIRTHDATE _____

DATE _____ SIGNATURE _____ BIRTHDATE _____