

I/WE MAKE THE FOLLOWING GIFT/PLEDGE IN SUPPORT OF VIRGINIA COOPERATIVE EXTENSION

Personal Information

Name _____

Spouse's name _____

Address _____

City _____ State _____ Zip _____

Home phone _____

Work phone _____

Email address _____

This is a joint gift with my spouse (named above)

Please note that it is our practice to list donor names and gift ranges in appropriate campus publications. From time to time, we will list your name unless you request otherwise.

I wish this gift to be **anonymous**. I understand that this gift will not be listed in any university publications.

Please send me an acknowledgment letter

Please do NOT send me an acknowledgment letter

Gift/Pledge Information

I/We make a gift/pledge of \$ _____

Contributions may be spread over five years.

I/We will give \$ _____ a year for _____ years (max five yrs)

Pledge payments will begin (month/year) _____

Please send reminders:

quarterly semi-annually annually no reminders

I/We would like this gift to be:

VCE Unrestricted (used where the need is greatest)

Applied to a VCE program area or county designated below.
(Multiple designations—with amounts—may be listed.)

Pledge Payment Options: *Contributions may be spread over five years. Please indicate your choice below. In order to protect your information, we can only accept credit card information mailed to: Gift Accounting, University Development (0336), 902 Prices Fork Road, Blacksburg, VA 24061.*

Cash or Check: \$ _____ is enclosed. Please make check payable to the **Virginia Tech Foundation, Inc.**

Credit Card: (See rule above.) Credit card number: _____ Exp. date _____

Signature _____

Charge scheduled payments of \$ _____ in the following months:

Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec

Electronic Funds Transfer (EFT): Please send me the proper forms to authorize the Virginia Tech Foundation, Inc., to electronically conduct approved transactions directly with my financial institution(s). Request forms by calling 1-800-533-1144 or emailing give.to.vt@vt.edu.

Stocks, Bonds, Mutual Funds, or Other Property: Approximate value: \$ _____
Please have a University Development officer contact me.

Matching Gift: In addition to my own personal gift commitment, _____ will match my gift.
I have enclosed the completed form.

Deferred Gift: (Please fill out the reverse side of this form.)

TOTAL of this side and reverse side: \$ _____

Signature _____ Spouse's signature (if applicable) _____ Date _____

Gifts to Virginia Cooperative Extension should be made to the Virginia Tech Foundation, Inc., a 501(c)(3) organization supporting VCE's mission.

Future Support

Personal Information

Same as front side of form

Name _____

Spouse's name _____

Address _____

City _____ State _____ Zip _____

Home phone _____

Work phone _____

Email address _____

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Gift Information

Gift type

Will Bequest

Revocable Living Trust

Life Insurance

Retirement Account

Charitable Remainder Trust

Other _____

Date of birth _____

Does your gift benefit someone else (i.e., a spouse) before VCE?

Yes No

If so, does that person have a similar gift provision?

Yes No

Date of birth of survivor beneficiary _____

Exact Language of Provision

Write in the space below or attach a copy

Value of Provision

For percentages and remainders of an estate, provide a good faith estimate of the dollar value as of the date this form is signed

Virginia Cooperative Extension program area or county to be supported (if any)

Signature _____ Spouse's signature (if applicable) _____ Date _____

We recognize that values of deferred gifts as well as the provisions themselves may change over time. Your signature verifies only that the above information is accurate as of this date and does not represent a binding commitment to the university. Should you ever update your gift plans, we suggest directing your gift to the *Virginia Tech Foundation, Inc., on behalf of Virginia Cooperative Extension* to ensure it is administered in the best manner possible.