



# Letter of Intention

Planned or Deferred Gift

Please send this form to:

**Laura Pooser**  
Director of Development  
College of Arts and  
Humanities  
P.O. Box 161990  
Orlando, FL 32816-1990

O: (407) 823 1195

Laura.Pooser@ucf.edu  
<http://ucffoundation.org>

Donor Name: \_\_\_\_\_

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

Birthdate(s): \_\_\_\_\_

Telephone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Name of contact person for estate donations: \_\_\_\_\_

Donor:

- Individual  
 Joint with spouse

## Type of Provision

- Bequest by Will
- Beneficiary of IRA or Retirement Plan
- Charitable Gift Annuity
- Charitable Remainder Trust
- Gift of Life Estate in Residence
- Charitable Lead Trust
- Life Insurance Proceeds or Beneficiary Designation
- Other : \_\_\_\_\_

The estimated current value of this gift plan is \$ \_\_\_\_\_

This planned or deferred gift is designated for:

College/Area: \_\_\_\_\_

Program/Project: \_\_\_\_\_

- I/We wish to be recognized as (a) member(s) of the Charles Millican Society.

All gifts to UCF are tax-deductible to the extent allowed by law. Please note that all donations should be made payable to:

**UCF Foundation, Inc.**

## Special Terms and Recognition - Please note any restrictions for your gift here:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

For recognition purposes, please list name as:

\_\_\_\_\_

## Thank you

for your support  
of the University  
of Central Florida.

Donor Signature \_\_\_\_\_

Date \_\_\_\_\_

Donor Signature \_\_\_\_\_

Date \_\_\_\_\_

### INFORMATION TO BE COMPLETED BY DEVELOPMENT OFFICER

Raiser's Edge ID:

Project #: \_\_\_\_\_ Development Officer: \_\_\_\_\_

### Pledge

### FOR USE BY UCF FOUNDATION STAFF

Processing: Operations \_\_\_\_\_ Log # \_\_\_\_\_ Date \_\_\_\_\_ Advancement Services \_\_\_\_\_