

CONFIDENTIAL STATEMENT OF BEQUEST PROVISION

| Name: | Phone(s) | : |
|---------------|--|---|
| Home | Address: | |
| | E-ma | ail: |
| Cumbe | rland degree and year of graduation (if applicable): | |
| Date of | f Birth (month/day/year): | |
| I have | made a provision for Cumberland University in my estate | e planning as follows: |
| <u>Type o</u> | f Provision | Estimated Amount |
| | Outright bequest in my will of: Percentage of residue of estate%. | \$ |
| C. | Estimated present value of estate is \$ Therefore, estimated value of bequest gift is: Life Insurance Policy Testamentary Trust arrangement with Cumberland University | |
| is the le | and birthdates of beneficiaries and describe terms and condi- indicate specific purpose below(please note that "Cumberland egal entity to be named in the will. Further specific designation nrestricted to Cumberland University | d University, a Tennessee not-for-profit corporation" |
| U | nrestricted to the following Cumberland University school or | department: |
| R | estricted for the specific purpose of: | |
| *A cop | y of your will, trust agreement or other documents or the app | licable provisions would be greatly appreciated. |
| Signatu | ıre | Date: |

Please know that this form is for record-keeping purposes only. It is not a legal document and in no way restricts your ability to change your will at any time. The details of all bequests remain confidential. On behalf of everyone who will benefit, <u>thank you</u> for supporting the work of Cumberland University. Please return this form to Cumberland University, Office of Advancement, One Cumberland Square, Lebanon, TN 37087 or fax to (615) 443-1806.

For more information, please contact Stephanie Ferrell, CFRE, Development Officer, Planned & Major Gifts, at (615) 547-1235 or sferrell@cumberland.edu.