

The Southwest Wisconsin Technical College Foundation does not provide legal or accounting advice. No statement made by Foundation or Southwest Wisconsin Technical College employees should be construed as such.

Gift of	f Tomorrow/Planned Gift Commitment Form
Name 1:	Date of Birth:
	Date of Birth:
Address:	
	re/Zip:
Phone:	E-mail:
Gift Sele	ection:
	Bequest by Will or Trust* in the amount of \$ or% of residue or
	specific bequest of (list property)
	Charitable Remainder Trust valued at approximately \$
	Beneficiary of a Commercial Annuity valued at approximately \$
	Owner & Beneficiary of Life Insurance Policy with a face value of \$
	Beneficiary of Life Insurance Policy with a face value of \$
	Beneficiary of Retirement Fund Plan valued at approximately \$
	Beneficiary of a Savings Account, CD or Savings Bonds valued at \$
* Sugges	sted Wording for Will or Trust:
Р	lease talk to your legal advisor regarding the specific language needed in your will. Your
	dvisor will want to know that the Foundation's legal name is "Southwest Wisconsin Technical"
	College Foundation, Inc., Fennimore, Wisconsin." If you wish to restrict the use of your
	equest, your advisor should be made aware of your wishes.
	rest Wisconsin Technical College Foundation, Inc. is a 501(c)(3) non-profit corporation with Feder
	39-1828080.
Gift Des	ignation:
	dicate the intended use of your planned gift:
	nal Information
	Please attach documentation of your gift plans.
	Please provide the name and contact information of your attorney, financial advisor, or
_	family member whom we may contact if necessary. This information will remain
	confidential.
N	Vame:Phone:
Recogni	
	dicate how you would like your name listed in our annual report and website. If you wish the
	e listed in honor/memory of someone, please give us the listing exactly as you like it to appear.
_	List Gift as follows:
	I/We prefer to remain anonymous.
	e(s):
1 Ounuall	on signatureDate

RETURN THIS FORM TO:
Southwest Tech Foundation,
1800 Bronson Boulevard, Fennimore, WI 53809