

STATEMENT OF DEFERRED GIFT PROVISION

As an indication of support for the University of Wisconsin-Madison, I/we are pleased to confirm that a provision has been made in my/our estate plan naming the **University of Wisconsin Foundation**.

Name(s):			
Address:			
City	State		Zip
Phone:	Email:		
Bequest via Will or Trust Details:			Other (see details)
☐ My/our provision names the			beneficiary.
With the understanding that varevocable, the approximate val			
This gift is:			
Unrestricted: to be used to be	benefit the University of V	Visconsin-Madison wh	ere the need is greatest.
☐ To be used to support the fo	ollowing college, school,	department, center, pro	ogram, and/or purpose(s):
Information shared by our donors	is always considered co	onfidential and can be	a accessed only by
Wisconsin Foundation and Alumn preferences or questions regardir acknowledged, please check this	ni Association staff and s ng the information you a	elect, relevant UW-M	adison staff. If you have
Important: It is understood that to as to the value of the provision h		nding upon the dono	r(s) or his/her/their estate
Signature of donor:		Date	e:
Signature of donor:		Date	e: