

## **LETTER OF INTENT FOR ESTATE GIFT**

I/we desire to provide for the future of the Technical College of the Lowcountry (TCL) through a provision in my/our estate plans. I/we understand that this future commitment can be revoked or modified by me/us at any time.

| Please provide the following information: |   |  |  |
|---|---|--|--|
| Name                                      | 's (Please include your spouse's name if this is a joint gift.)   |  |  |
| Addre                                     | SS S  |  |  |
| City                                      | State Zip Code  |  |  |
| Phone                                     | Email   |  |  |
|   | nave made the following provision to leave a legacy to Technical College of the Lowcountry (please all that apply):   |  |  |
| 0   | I/we have included the Technical College of the Lowcountry Foundation in my/our Will or Revocable Trust.  |  |  |
| 0   | I/we have established an income-producing gift plan for the benefit of the Technical College of the Lowcountry Foundation (charitable gift annuity, charitable lead trust, charitable remainder trust, other).  |  |  |
| 0   | I/we have made other estate provisions naming the Technical College of the Lowcountry Foundation as beneficiary (life insurance policy, retirement plan or IRA, other).   |  |  |
| you n<br>You n                            | e provide a copy of the relevant portion of the legal documents in which your gift is described, or ay provide a letter from your financial or legal adviser describing your future gift to the College. The ay also briefly describe your planned gift for the benefit of the Technical College of the puntry: |  |  |
|   | ,   |  |  |
|   |   |  |  |
|   |   |  |  |



| I/we wish to inform Technical College of the Lowcountry Foundation, for long-term planning purposes only, that the current value of my/our future gift is \$  (If your gift is a percentage of your estate, please indicate the approximate value.) |   |                                    |  |  |   |  |  |
|---|---|------------------------------------|--|--|---|--|--|
|   |   |                                    |  |  |   |  |  |
|   |   |                                    |  |  | Please indicate the area of the College you wish to support with your gift, such as unrestricted (general |  |  |
| purpo   | ose) or a specific program:   |                                    |  |  |   |  |  |
|   |   |                                    |  |  |   |  |  |
| 0   | You may publish my/our names, as listed above, as part of The Mather Legacy Society, or other |                                    |  |  |   |  |  |
|   | recognition societies or honor rolls.   |                                    |  |  |   |  |  |
| $\bigcirc$  | I/we prefer not to be listed.   |                                    |  |  |   |  |  |
|   | ,   |                                    |  |  |   |  |  |
|   |   |                                    |  |  |   |  |  |
|   |   |                                    |  |  |   |  |  |
| Date  | Signature   | Spouse's Signature (if applicable) |  |  |   |  |  |
|   |   |                                    |  |  |   |  |  |
|   |   |                                    |  |  |   |  |  |
| Please  | e mail the Letter of Intent to:   |                                    |  |  |   |  |  |
| TCL F   | oundation   |                                    |  |  |   |  |  |
| Post C  | Office Box 2614   |                                    |  |  |   |  |  |
| Beauf   | fort, SC, 29901   |                                    |  |  |   |  |  |