



## I/We make the following pledge in support of Virginia Tech:

### Personal Information

Name \_\_\_\_\_  
 Spouse's name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home phone \_\_\_\_\_  
 Work phone \_\_\_\_\_  
 Email address \_\_\_\_\_

This is a joint gift with my spouse (named above)

Please note that it is our practice to list donor names and gift ranges in appropriate campus publications. From time to time, we will list your name unless you request otherwise.

I wish this gift to be **anonymous**. I understand that this gift will not be listed in any university publications.

Please send me an acknowledgment letter

Please do NOT send me an acknowledgment letter

### Gift Information

I/We make a pledge of \$ \_\_\_\_\_

I/We will give \$ \_\_\_\_\_ per year for \_\_\_\_\_ years (max 5 yrs)

Pledge payments will begin (month/year) \_\_\_\_\_

Please send reminders:

quarterly  semi-annually  annually  no reminders

I/We would like this gift to be:

Unrestricted (used where the need is greatest)

Applied to a college, department or area designated below (multiple designations—with amounts—may be listed)

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

### Pledge Payment options (Gifts may be spread over 5 years) Please indicate your choice below.

**Cash or Check:** \$ \_\_\_\_\_ is enclosed. Please make check payable to the Virginia Tech Foundation, Inc.

**Credit Card:** Credit card number: \_\_\_\_\_ Exp. date \_\_\_\_\_

Signature \_\_\_\_\_

Charge scheduled payments of \$ \_\_\_\_\_ in the following months:

Jan  Feb  Mar  Apr  May  Jun  Jul  Aug  Sep  Oct  Nov  Dec

**Electronic Funds Transfer (EFT):** Please send me the proper forms to authorize the Virginia Tech Foundation, Inc. to electronically conduct approved transactions directly with my financial institution(s). Forms may be requested by calling 1-800-533-1144, or email: [give.to.vt@vt.edu](mailto:give.to.vt@vt.edu).

**Stocks, Bonds, Mutual Funds, or Other Property:** Approximate value: \$ \_\_\_\_\_  
 Please have a University Development officer contact me.

**Matching Gift:** In addition to my own personal gift commitment, \_\_\_\_\_ will match my gift.  
 I have enclosed the completed form.

**Deferred Gift:** Please fill out the reverse side of this form.

**TOTAL of this side and reverse side:** \$ \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_ Spouse's signature (if applicable) \_\_\_\_\_

## Future Support

### Personal Information

Same as front side of form.

Name \_\_\_\_\_

Spouse's name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home phone \_\_\_\_\_

Work phone \_\_\_\_\_

Email address \_\_\_\_\_

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### Gift Information

#### Gift type

Revocable Living Trust

Will Bequest

Retirement Account

Life Insurance

Charitable Remainder Trust

Other

Date of birth \_\_\_\_\_

Does your gift benefit someone else (*i.e., a spouse*) before Virginia Tech?  Yes  No

If so, does that person have a similar gift provision?

Yes  No

Date of birth of Survivor Beneficiary \_\_\_\_\_

*While all deferred gifts are important, those contingent on life of spouse or other beneficiary are counted in the campaign only if the other person has made the same deferred gift commitment.*

### Exact Language of Provision

Write in the space below or attach a copy

### Value of Provision

For percentages and remainders of an estate, provide a good faith estimate of the dollar value as of the date this form is signed

### Areas of the university to be supported (if any)

Date \_\_\_\_\_

Signature \_\_\_\_\_ Spouse's signature (if applicable) \_\_\_\_\_

We recognize that values of deferred gifts as well as the provisions themselves may change over time. Your signature verifies only that the above information is accurate as of this date and does not represent a binding commitment to the university. Should you ever update your gift plans, we suggest directing your gift to the "Virginia Tech Foundation, Inc" to ensure it is administered in the best manner possible.