

## **ESTATE GIFT INTENTION FORM**

I/We am/are pleased to advise Northeastern University (the University) that I/we have provided for a future gift to benefit the University through a provision in my/our estate plans. I/We wish to have my/our estate gift intention recognized by the University. For these reasons, I/we am/are providing the University with the following estimate and information regarding my/our estate gift.

I/We direct that my/o	ur estate gift be used for the follow	wing purpose:	
I/We have made prov	·	have a value of approximately \$transferred to the University through	
□ Will	□ Trust	☐ Retirement Plan	☐ Life Insurance Policy
☐ Other (please	describe)		
The contact informati	on of my/our estate planning attor	rney, executor(s) and/or Trustee(s) is	as follows:
	on for the Plan Administrator or I follows:	Insurance Company for my/our Retire	ement Plans and/or Life
The University ackno	wledges that my/our future gift re	mains fully revocable.	
The University may/r	nay not include my/our names wit	th other donors in a publication or do	nor listing.
Signature	Date	Signature	Date
Print Name		Print Name	
Date of Birth		Date of Birth	