



Commitment Form

Planned or Deferred Gift

Please send this form to:

UCF Foundation, Inc.
Office of Advancement
12424 Research Parkway,
Suite 250
Orlando, FL 32826

(407) 882-1220

www.ucffoundation.org

Donor Name: _____

Donor Address: _____

Telephone Number: _____

Email Address: _____

Name of contact person for estate donations and contact information:

Donor:

- Individual
 Joint with spouse

Planned Gift or Deferred Gift Commitment

The gift commitment value is \$ _____

[optional] The present value (charitable deduction) is estimated at \$ _____

- The value indicated above of the planned or deferred gift commitment from the donor to the University of Central Florida will be utilized for recognition purposes.
- The original gift commitment will be credited toward the comprehensive campaign's gift goal.

Type of provision: Bequest by will
 Life insurance – UCF Foundation as owner and beneficiary
 Other: _____

This planned or deferred gift is **designated for:**

- Area of greatest need
 My area of interest:
Area/College of _____,
Program/Project name: _____
 Other: _____

I wish to have a gift agreement drafted in the near future to create instructions for the disposition of funds which will benefit my preferred area of interest at the University of Central Florida.

All gifts to UCF are tax-deductible to the extent allowed by law. Please make a check payable to:

UCF Foundation, Inc.

Special Terms and Recognition: Please attach any current applicable estate documents. Note any restrictions for your gift here:

For recognition purposes, please list name as: _____

Thank You

for your support of
the University of
Central Florida.

Donor Signature _____ Date _____

FOR USE BY UCF ADVANCEMENT STAFF – information to be completed by DEVELOPMENT OFFICER

Raiser's Edge ID: _____ Project #: _____ Development Officer: _____
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