



HOBART AND WILLIAM SMITH
COLLEGES

Office of Advancement

THE WHEELER SOCIETY

Donor(s): _____

Class or other affiliations: _____

I have made provisions for Hobart and William Smith Colleges in my:

Estate Plans _____

Retirement Plans _____

Charitable Remainder Trust _____

Life Insurance Policy _____

Other _____

How I would like my gift used: _____

Estimated Value _____

Comments _____

Name and address of an individual whom the Colleges may contact to provide information about the outcomes of my gift:

Relationship: _____

I (do/do not) authorize the Colleges to announce this gift in public documents.

Donor's Signature _____ Date _____

Donor's Signature _____ Date _____