

Dear Donor,

We realize that many people who plan to support ENMU through the ENMU Foundation with their estate and/or financial plans prefer to keep their intentions private. However, by letting us know of your plans, we can thank you during your life, and confirm that we are able to fulfill your stated intentions.

We are also excited to introduce the 1934 Society, a new recognition group honoring alumni and friends who have included the ENMU Foundation in their estate plans. The society celebrates the year of ENMU's founding and recognizes those who make a lasting difference for future generations of Greyhounds. Our goal is to welcome the first 193 individuals or families as inaugural members.

As a member of the 1934 Society, you will be invited to special recognition opportunities, including our annual Burying of the Beef barbecue each June, where we celebrate ENMU's traditions and the generosity of our loyal supporters. Just as importantly, your participation encourages others to consider remembering ENMU in their wills, trusts, or other planned gifts.

Please know that completing this form is non-binding; we understand that you may change your plans at any time. All information you share with us will be kept confidential. However, as a state entity ENMU is subject to the Inspection of Public Records Act (IPRA), NMSA 1978, §14-2-1 to -12.

Thank you for considering this meaningful way to shape ENMU's future. Go Hounds!



Warren Lloyd
Vice President of Advancement
and Public Relations



Noelle Bartl
ENMU Foundation Executive Director and
Associate Vice President of Advancement and
Public Relations

Once complete, please return attached form to:

ENMU Foundation
Station 08
1500 S Ave K
Portales, NM 88130

Future Gift Intention Form

ENMU Foundation | Phone: 575.562.2412 | ENMU Station 08, 1500 S Ave K, Portales, NM 88130

Personal Information

Legal name: Last: _____ First: _____ Middle: _____
Date of birth: _____ Class year: _____
Spouse name: Last: _____ First: _____ Middle: _____
Date of birth: _____ Class year: _____
Mailing address: _____ City: _____ State: _____ ZIP: _____
Phone: _____ Email: _____

Your Gift Intention

Please provide the following information and attach a copy of the documentation or appropriate language from your will or trust, if available. Please complete all that apply.

I/We want to support the mission of ENMU through a planned gift as described below (please check all that apply):

- I/We have included a bequest for ENMU in my/our will or trust (if a trust, please indicate the type).
 Revocable Trust Irrevocable Trust Charitable Remainder Trust Other: _____
- I/We have named ENMU as a beneficiary of an asset:
 Bank, Investment, or Other Financial Account Life insurance policy
 Retirement plan (select type): IRA 401(k) 403(b) Other: _____

The anticipated value of my/our gift is/will be approximately \$ _____ or _____% of my/our estate. (If a percentage is indicated, please also share the estimated current total value of your estate, if known:

\$ _____ . Please include a copy of the bequest language or other wording describing your planned gift.)

Gift Purpose

Please describe how you would like your gift to be used (for example: unrestricted support, to establish a scholarship, to create or add to an endowment, to support a specific program, etc.):

Recognition

Thank you for remembering the ENMU Foundation in your legacy planning. We hope you join us as an inaugural member of the 1934 Society.

- I agree to be an inaugural member of the 1934 Society. Please list my/our name(s) as follows (please note the amount of your intended gift will not be published): _____
- I/we prefer no public recognition and to be listed as "anonymous" in any publication.

Acknowledgement and Signature

I/We understand this form does not create a binding obligation and any details about my/our gift will remain confidential. Eastern New Mexico University Foundation understands that the size of my/our future gift may change.

Printed name _____ Signature _____ Date _____

Spouse (if joint) printed name _____ Spouse (if joint) signature _____ Date _____