

## **Confidential Statement of Intent**

As of		, I/we	
]	Date	Name(s)	
-	Ũ	acy for Neumann University through a provision in my/o revocable and can be modified.	our estate plans. I understand that
		Legacy Gift Information	
		Form Neumann University, for long-term planning purposing for the second s	ses only, that as of this date, the
I	Docume	ntation, such as a page from my will, beneficiary designa	tion form, etc. is enclosed.
l	The estir	nated value of my/our gift is \$ (or	f % of/our residuary
	estate, va	lued at).	
I/we	e would rath	er not disclose the value of my/our planned gift at this tin	me.
		Guardian Angel Society Membership	l.
publishe intentio	ed in Neuma n will be kej	you become a member of the Guardian Angels Society. ' nn University materials and on the website. However, th ot strictly confidential. Please indicate your preference be as members of the Guardian Angel Society as follows:	he nature and size of any legacy
I pre	efer to remai	n anonymous for this gift and wish not to appear on any	recognition lists.
Signatu	re(s)		Date

Please return this completed form to: Fran Walmsley, Director of Major Gifts & Planned Giving, Neumann University, One Neumann Drive, Aston, PA 19014, or email at walmslef@neumann.edu.