



**HERITAGE CIRCLE PLANNED GIVING
LETTER OF INTENT**

Please use this form to share specifics of your intended estate gift for the benefit of South Arkansas Community College Foundation.

Name (s): _____

Address: _____

City: State: Zip: _____

Phone (Home): _____ (Cell): _____ Email: _____

THE GIFT

As evidence of my/our desire to provide a legacy of support, I/we wish to inform South Arkansas Community College Foundation that you have been named in my/our estate plans.

This gift is: outright bequest contingent bequest other _____

The estimated value of this gift *as of today's date* is: \$ _____

I/We designate this gift to be used for:

- Unrestricted support (where the need is greatest)
- Scholarship: _____
- The following campus department, program or need: _____
- I have attached a copy of the relevant portion of my will or trust (not required).

RECOGNITION

- Please list my/our name(s) without disclosure of gift amount in the South Arkansas Community College Foundation Heritage Circle.
- I/we would like this gift to remain anonymous.

This statement is an expression of my current plans and is for informational purposes only. I understand that this statement is not legally binding on my estate and is revocable at any time.

Signature

Date

Signature

Date

Please return this form to: South Arkansas Community College Foundation, Attn: Cynthia Reyna, P.O. Box 7010, El Dorado, AR 71731-7010 or email to foundation@southark.edu, (870) 864-7130.