



# Letter of Intention

**Donor:**

☐ Individual  
☐ Joint with Spouse

Donor(s) Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_



The Compass Society honors donors who have made a legacy gift to the University of North Florida through their estate plans. Members are recognized for their commitment to UNF's future, invited to exclusive events, and receive information about students, faculty, and research. Thank you for supporting the University in this meaningful way and leaving a lasting legacy.

## Please mandate your planned gift

<input type="checkbox"/> Bequest by will or trust	<input type="checkbox"/> Charitable remainder trust
<input type="checkbox"/> Beneficiary of IRA or retirement plan	<input type="checkbox"/> Gift of real estate
<input type="checkbox"/> Charitable Gift Annuity	<input type="checkbox"/> Life insurance proceeds or beneficiary designation
<input type="checkbox"/> Business, securities	<input type="checkbox"/> Other: _____

Estimated current value of this gift is \$ \_\_\_\_\_

UNF is listed as the \_\_\_\_\_ primary or \_\_\_\_\_ contingent (select one)

This planned or deferred gift is designated for: College Area: \_\_\_\_\_

Program/Scholarship \_\_\_\_\_

### Please add any details here

### Contact information of attorney, personal representative or financial advisor (optional)

Donor Signature \_\_\_\_\_ Date \_\_\_\_\_

Donor Signature \_\_\_\_\_ Date \_\_\_\_\_

### Please send this form to:

**Leigh M. Palmer '05, '09**  
*Director of Development, Planned Giving*  
University of North Florida  
1 UNF Drive | Building 60 | Jacksonville, FL | 32224  
O: 904.620.5396 C: 904.403.7181  
l.palmer@unf.edu

☐ I wish to be recognized as (a) members of the UNF Compass Legacy Society.

☐ I wish to have an agreement drafted for the disposition of this gift which will benefit my preferred area of interest at the University of North Florida.