



## Fanny Jackson Coppin Legacy Society

### Confidential Reply Form

I/we desire to provide for the future well-being of the CSU Development Foundation through a provision in my/our estate plans, and with this letter I/we are informing the CSUDF of those plans.

\_\_\_\_\_  
*Name*

\_\_\_\_\_  
*Name*

\_\_\_\_\_  
*Address, City, State, Zip*

\_\_\_\_\_  
*Phone*

\_\_\_\_\_  
*E-mail address*

**I/we have made a provision to leave a legacy to the CSU Development Foundation through my/our:**

\_\_\_ Will            \_\_\_ Retirement plan or IRA            \_\_\_ Other: \_\_\_\_\_

\_\_\_ Living trust    \_\_\_ Life insurance policy

Is CSUDF designated as a \_\_\_ primary or \_\_\_ contingent beneficiary?

I/we wish to inform the CSU Development Foundation, for long-term planning purposes only, that the estimated current value of my/our future gift is \$ \_\_\_\_\_. (If your gift is a percentage, please indicate the approximate value.)

**I/we wish to support:**

\_\_\_ Greatest immediate need

\_\_\_ A specific fund or purpose (Please contact us to be sure we can accommodate your wishes.)

with my/our estate gift to the CSU Development Foundation.

I/we understand that I/we are not legally bound by this letter of intent and that I/we may choose to increase, decrease, or revoke my/our bequest or beneficiary designation at any time, at my/our sole discretion.

Optional: To assist us with future gift administration and planning, please enclose a copy of the page(s) of your will, retirement plan, or insurance policy denoting the *Coppin State University Development Foundation* section along with the signature page.

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Signature*

*Date of birth/age for our records:* \_\_\_\_\_

Please provide the name and contact information for your executor/trustee, to help ensure that your wishes are honored at the time your gift is received.

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*Executor/Trustee Name*

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*Address, City, State, Zip*

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*Phone*

*E-mail address*

**Gift Recognition (choose one):**

\_\_\_\_\_ You may publish my/our names in your lists of *Fanny Jackson Coppin Legacy Society* members **as a way to recognize my/our commitment to CSU** or as a motivation for others to leave a future gift to benefit the CSU Development Foundation.

\_\_\_\_\_ I/we do not want my/our names published.

Donations are administered by The Coppin State University Development Foundation for the benefit of Coppin State University. Please use the following information for your documents:

**Legal Name:** Coppin State University Development Foundation, Inc.

**Address:** Coppin State University Development Foundation, Inc.  
2500 W. North Avenue  
Baltimore, MD 21216

**Tax ID number (EIN): 23-7127440**

**Please send the completed form along with any associated documentation, to:**

Office of Institutional Advancement - CSUDF  
Coppin State University  
Attn: Monae Hicks  
Miles Connor Administration Building  
3th Floor, Room 313  
2500 W. North Avenue  
Baltimore, MD 21216

**You may also forward it by email** to Monae Hicks, at [mohicks@coppin.edu](mailto:mohicks@coppin.edu). Please direct any questions to Monae at 410-951-3811. Thank you!