



Southern Maine Community College Legacy Society
LEGACY GIFT FORM

Donor's Name(s):

Address:

City:

State:

Zip Code:

Home Phone:

Cell Phone:

Email:

I have provided for Southern Maine Community College in the following way:

- ☐ Southern Maine Community College will receive a bequest under a will or living trust.
- ☐ Southern Maine Community College is named as a primary beneficiary of a retirement plan.
- ☐ Southern Maine Community College is named as a primary beneficiary of a life insurance policy.
- ☐ Southern Maine Community College is named in a "payable on death" or "transfer on death" account.
- ☐ Other (please describe): _____

Gift amount, approximate amount, or description (optional): \$ _____

When this gift is received by SMCC, it is my wish that the College use my gift for the following purpose:

- ☐ Area of greatest need
 - ☐ Other: (I understand that any restrictions on my gift must be consistent with SMCC Foundation policies and that the SMCC Foundation may amend restrictions or criteria to be consistent with Foundation policies without compromising the intent of the gift)
- _____
- _____

By completing this bequest form, I become a member of the **SMCC Legacy Society**.

- ☐ SMCC has my/our permission to publically identify me as a member of the SMCC Legacy Society during my life time. If SMCC acknowledges me/us during lifetime, I/we would like to be acknowledged using the following name(s):
- ☐ I do not give permission to be publically identified as a member of the SMCC Legacy Society during my life time.

In the event of unforeseen circumstances that require any further changes in the above estate planning provisions, I agree to notify Southern Maine Community College of such change.

Donor Signature _____ Date _____

Donor Signature _____ Date _____

Southern Maine Community College Foundation
2 Fort Road, South Portland, ME 04106
207-741-5548
mrichards@mainecc.edu