



Updated December 2, 2025

# THE FOUNDATION

FOR

OKLAHOMA CITY COMMUNITY COLLEGE

## CONFIRMATION OF YOUR PLANNED GIFT

I/We, the undersigned, have included the Foundation for OCCC in my/our will, revocable living trust, or other deferred giving, and offer the following description of the gift within this form for the CONFIDENTIAL use of the Foundation for OCCC office.

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Spouse Name (if applicable): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone (Cell / Home): \_\_\_\_\_ Email: \_\_\_\_\_

## DESCRIPTION OF GIFT

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## TYPE OF GIFT

## TODAY'S VALUE OF OCCC SHARE

Will.....	\$	_____
Revocable Living Trust.....	\$	_____
Life Insurance .....	\$	_____
Retirement Plan.....	\$	_____
Other .....	\$	_____

I/We understand that this is not a legal or binding commitment on my/our estate. The Foundation for OCCC should understand that the size of this future gift may be significantly different from the amount estimated above. If for any reason in the future the Foundation for OCCC is no longer included in my/our plan, I/we will notify the Foundation for OCCC to update the records.

## PURPOSE OF GIFT

This is an unrestricted gift to the Foundation for OCCC

This gift is to be used for the following purpose or program: \_\_\_\_\_

A copy of the relevant provision of my will, revocable trust, or beneficiary designation form is attached (or the relevant pages such as the title page, description of gift page(s) and signature page.)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Please return care of Christi Jeffreys, 7777 South May Avenue. Oklahoma City, OK 73159*