



Iowa State University Foundation
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DONOR CONFIDENTIALITY REQUEST

I/We, _____ have made or am/are contemplating making a gift, pledge or bequest commitment to the Iowa State University Foundation and hereby request that my/our identity not be disclosed by the foundation to the general public unless disclosure is required by law. I/We understand that the foundation generally wishes to encourage donors to allow their gifts to be publicized because publicity serves to encourage others to similarly support the foundation and Iowa State University, but that the foundation also recognizes and respects the desire of some donors not to have their identities disclosed to the public.

I/We understand that as a result of this request, the only information the foundation will make available for general public examination is the amount and purpose of my/our gift(s), pledge(s) or bequest commitment(s), and that unless otherwise required by law my/our identity and other personal information will not be disclosed.

I/We understand that I/we may withdraw this request as to any or all gifts, pledges or bequest commitments at any time.

Scope of Request (complete only one of the following):

- This request shall apply to all gifts, pledges or bequest commitments I/we have made or may make at any time.
- This request shall apply only to the following specified gift(s), pledge(s) and/or bequest commitment(s) (*use additional pages as needed*):

Duration of Request:

The foundation's policy is that donor confidentiality will be preserved until the donor's death. Unless you request otherwise, after your death the foundation will consider your name (but no other personal information) to be public information in connection with the gift(s) which are encompassed by this request. Please indicate below if you prefer instead that confidentiality be preserved after your death.

- My/Our identity should be kept confidential after my/our death(s).

Donor Signature _____ Date _____

Donor Signature _____ Date _____