# Legacy Gift Confirmation

(Formalization)

**I/We,**_____**, of**_____**,** _____
[Name(s)] (City) (State)

**confirm that I/we have legally provided for my/our commitment to the Life & Legacy® initiative to grow the JCF-managed endowment fund(s) that benefit the following Southern New Jersey organization(s):**

- ☐ Adath Emanu-El
- ☐ Chabad Lubavitch of Camden & Burlington Counties
- ☐ Congregation Beth El
- ☐ Congregation Beth Tikvah
- ☐ Congregation B'nai Harim
- ☐ Congregation B'nai Tikvah Beth Israel
- ☐ Congregation Kol Ami
- ☐ Congregation Sons of Israel
- ☐ Foxman Torah Institute
- ☐ Jewish Community Foundation, Inc.
- ☐ Jewish Community Relations Council
- ☐ Jewish Community Voice
- ☐ Jewish Federation of Southern New Jersey
- ☐ Jewish Senior Housing & Healthcare Service (Lions Gate & Saltzman House)
- ☐ Katz JCC
- ☐ Kellman Brown Academy
- ☐ Politz Day School
- ☐ Samost Jewish Family & Children's Service
- ☐ Temple Beth Sholom
- ☐ Temple Har Zion
- ☐ Temple Sinai
- ☐ Torah Links of South Jersey
- ☐ Young Israel of Cherry Hill
- ☐ Other:

_____
_____
_____

_____ _____
**Donor Signature** **Date**

_____ _____
**Donor Signature** **Date**

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***OPTIONAL: The following questions are optional. If you choose to answer these questions, may we share your answers with the beneficiary(-ies) you selected?*** ☐ ***Yes*** ☐ ***No***

I/we have provided for this gift within my/our estate plan and confirm that I/we have made the appropriate legal arrangements to assure that this will be accomplished prior to or on or about the time of my/our passing. My/our commitment is acknowledged within the following document(s):

- ☐ Bequest in Will
- ☐ Beneficiary of a Life Insurance Policy
- ☐ Beneficiary of a Retirement Plan
- ☐ Cash Endowment Gift
- ☐ Charitable Remainder Trust
- ☐ Charitable Lead Trust
- ☐ Donor Advised Fund
- ☐ Other (please describe):

_____

I am/we are pleased to be able to support the Southern New Jersey Jewish community through my/our legacy gift. The approximate value of my/our commitment will amount to

$_____ or _____% of my/our estate.

My/our estate attorney:_____ Phone:_____

My/our financial planner:_____ Phone:_____

*Other advisor:*_____

LIFE & LEGACY is sponsored and presented by the Harold Grinspoon Foundation in conjunction with the JCF, Inc. in Southern New Jersey.

**If you have *not* already submitted confirmation of your legacy gift,**
**PLEASE COMPLETE & RETURN THIS FORM TO:**

JCF, Inc. • Attn: Mike Staff • 1301 Springdale Rd., Suite 200 • Cherry Hill, NJ 08003
marketingjcf@jfedsnj.org

The JCF is here to assist you in fulfilling your philanthropic goals.
Please contact us at 856-673-2528, infojcf@jfedsnj.org, or visit www.jcfsnj.org for more information.