

Legacy Gift Confirmation

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

confirm that I/we have legally provided for my/our commitment to the LIFE & LEGACY® Initiative of the Jewish Community Foundation, Inc. (JCF) to benefit these Southern New Jersey organization(s):

- | | | |
|--|---|---|
| <input type="checkbox"/> Adath Emanu-El
<input type="checkbox"/> Congregation Beth El
<input type="checkbox"/> Congregation Beth Tikvah
<input type="checkbox"/> Congregation B'nai Harim
<input type="checkbox"/> Congregation B'nai Tikvah-Beth Israel
<input type="checkbox"/> Congregation Kol Ami
<input type="checkbox"/> Congregation Sons of Israel
<input type="checkbox"/> Foxman Torah Institute
<input type="checkbox"/> Jewish Community Foundation, Inc. | <input type="checkbox"/> Jewish Community Relations Council
<input type="checkbox"/> Jewish Community Voice
<input type="checkbox"/> Jewish Federation of Southern New Jersey
<input type="checkbox"/> Jewish Senior Housing & Healthcare Service
<input type="checkbox"/> Katz JCC
<input type="checkbox"/> Kellman Brown Academy
<input type="checkbox"/> Politz Day School | <input type="checkbox"/> Samost Jewish Family & Children's Service
<input type="checkbox"/> Temple Beth Sholom
<input type="checkbox"/> Temple Har Zion
<input type="checkbox"/> Temple Sinai
<input type="checkbox"/> Torah Links of South Jersey
<input type="checkbox"/> Other: _____

_____ |
|--|---|---|

Donor Signature

Date

Donor Signature

Date

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):

- | | |
|--|--|
| <input type="checkbox"/> Bequest in Will
<input type="checkbox"/> Beneficiary of a Life Insurance Policy
<input type="checkbox"/> Beneficiary of a Retirement Plan
<input type="checkbox"/> Cash Endowment Gift | <input type="checkbox"/> Charitable Remainder Trust
<input type="checkbox"/> Charitable Lead Trust
<input type="checkbox"/> Donor Advised Fund
<input type="checkbox"/> 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.jcfnsj.org for more information.