

JEWISH COMMUNITY FOUNDATION OF THE WEST

TO: JEWISH COMMUNITY FOUNDATION OF THE WEST

FROM: _____

SUBJECT: OPEN NEW FOUNDATION FUND(S)
 REVISE AUTHORIZED FUND AGENTS

DATE: _____

The Governing Board (“*Board*”) for the _____
(Organization name)

authorizes the Jewish Community Foundation of the West (*Foundation*) to establish and maintain the named fund(s) according to the directions listed in Table 1 and Table 2. Accordingly, please take the following actions:

1. Fund deposits and distributions will be directed by the *Board* through our authorized agents.
2. All transactions will require confirmation from at least two authorized agents. The contact information for all authorized agents is provided in Table 3 on page 2.
3. The *Board* will, on an as needed basis, provide the *Foundation* with a memorandum to identify and update the authorized agents. No change in agent designation will be effective unless presented in writing, executed by at least two officers of the *Board*.
4. Invest all funds at the direction of the authorized agents identified in Table 3 consistent with the fund objectives and portfolio designations identified in Table 2.
5. Distributions from our fund(s) should be restricted and used to only support the activities listed in Table 1 (below) or are unrestricted and are to be used at the direction of the *Board*.

Table 1. Fund Restrictions

	Fund Name	Restrictions	Authorized Activities
1		<input type="checkbox"/> yes <input type="checkbox"/> no	
2		<input type="checkbox"/> yes <input type="checkbox"/> no	
3		<input type="checkbox"/> yes <input type="checkbox"/> no	

 Officer Signature:

 Officer Signature:

 Print Name:

 Print Name:

 Date

 Date

Table 2. Fund Investment Criteria

	FUND NAME	FUND TYPE: Endowment or Philanthropic	INVESTMENT OBJECTIVE [Growth, Balanced, Cash, Other]
1			
2			
3			
4			
5			
6			

Table 3. Authorized Fund Agents (provide at least three)

	Authorized Agent(s) Name(s)	Provide Quarterly Statements and Correspondence [yes / no]	Contact Information (mailing address, phone, email)
1		<input type="checkbox"/> yes <input type="checkbox"/> no	
2		<input type="checkbox"/> yes <input type="checkbox"/> no	
3		<input type="checkbox"/> yes <input type="checkbox"/> no	
4		<input type="checkbox"/> yes <input type="checkbox"/> no	