



*Name of Donor Advised Fund _____

*Date: _____

To the Jewish Community Foundation of the West:

Pursuant to the terms of the Donor Advised Fund which I/we have established at the Jewish Community Foundation of the West, I/we hereby recommend the following grant distribution for your consideration.

Grantee Information

*Name: _____

*Address: _____

City: _____

State: _____

*Zip code: _____

*Phone: _____

Email/website: _____

Description: _____

*Amount: \$ _____

The suggested grant does not represent the payment of any pledge or other financial obligation, nor will I receive any goods for services for this contribution. If any benefits or privileges are offered in connection with such distribution(s), I/we will not accept them.

*Signature: _____

Signature: _____

***required information**

Email the form to pam.herman@jcfwest.org
or mail
Jewish Community Foundation of the West
2130 21st Street
Sacramento CA 95818