

Jewish Community Foundation of Greater Mercer (JCFGM)

Donor Advised Fund Recommendation Form

ATTN: Scott Schaefer, President, JCFGM
 4 Princess Road, Suite 211, Lawrenceville, NJ 08648
 Phone 609.219.0555 Fax 609.219.9040 E-mail Catherine@FoundationJewish.org

Name of Donor Advised Fund (print or type below)

Pursuant to the terms of the Donor Advised Fund that I have established with the Jewish Community Foundation of Greater Mercer, New Jersey (JCFGM), I hereby recommend the following grants from the income and/or principal (if income is insufficient) of the Fund. Please list only one charity per line. All fields are required. **Minimum grant \$100.**

Office Use Only

	Amount	Name of Organization	Street Address	City, State, Zip	Purpose	
1						↓
2						
3						
4						
5						
6						
	0.00	TOTAL AMOUNT	Please be sure to complete all fields.			

By signing this form, I hereby certify that neither I nor anyone else will receive any benefit from the recommended charitable organization. This includes, for example, payment for dinners, events, and memberships that have a non-deductible portion; school tuition; goods at a charitable auction; or journal ads that promote a business entity. In addition, this grant recommendation is not payment of an enforceable pledge or personal obligation and is not made for lobbying purposes or to support a political campaign. I realize that JCFGM cannot approve a recommendation inconsistent with its mission or purpose.

Signature

Printed Name

Signature

Printed Name

Date

Street Address **City, State, Zip**

* Office Use Only: Initials by an employee of JCFGM indicate that the charity has been verified for the following, among other necessary criteria: current 501(c)(3) status; the charity is not a private non-operating foundation; the charity's purpose fits JCFGM's mission and purpose; there is no quid pro quo. If the letter "R" appears, this indicates that the organization does not conform to requirements.

