



# Letter of Intent



## Your Information

Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

## Gift Intention

Today, I/we intend to make a Life & Legacy gift to the designated organization(s)\* and will confirm the gift within the next (12 or fewer) \_\_\_\_\_ months

I/we have already made arrangements for a legacy gift

Donor(s) Signature(s) \_\_\_\_\_ Date \_\_\_\_\_

Donor(s) Signature(s) \_\_\_\_\_ Date \_\_\_\_\_

*This commitment does not create a legal obligation and may be modified by the donor(s) at any time*

## Organization(s)

The organization(s) you select will place your gift into an endowment fund at the Jewish Community Foundation

- Beth Chaim Reform Congregation
- Congregation Shir Ami
- Jack M. Barrack Hebrew Academy
- JEVS Human Services
- Jewish Federation of Greater Philadelphia
- KleinLife
- Kosloff Torah Academy
- Lubavitch of Bucks County
- Maccabi USA
- Main Line Reform Temple
- Temple Beth Hillel - Beth El
- Temple Beth Zion - Beth Israel
- Temple Sinai
- Other: \_\_\_\_\_

## Your Gift

- Gift in Will or Trust
- Beneficiary of Retirement Plan
- Beneficiary of Life Insurance Policy
- Cash Endowment Gift
- Charitable Gift Annuity or Charitable Remainder Trust
- I/we would like to know more about gift options
- Other: \_\_\_\_\_

The (estimated) value of my gift is \$ \_\_\_\_\_

Or \_\_\_% with an (estimated) value of \$ \_\_\_\_\_

## Permission to List Name(s)

To encourage others to make commitments for the future, I/we permit my name(s) to be listed as follows:

\_\_\_\_\_

\_\_\_\_\_

I/We wish to remain anonymous at this time

\* Or successors

## Contact Information

**PLEASE COMPLETE AND RETURN THIS FORM TO:**

Sonya Aronowitz, Life & Legacy Coordinator, 215.832.0574, [legacy@jewishphilly.org](mailto:legacy@jewishphilly.org)