

**Legacy**, funded by the Harold Grinspoon Foundation

Community.

## Confirmation of Commitment

In the tradition of our faith, I/we have made a provision for a legacy gift to the Jewish

ADDITIONAL DONOR SIGNATURE

DATE

I/we understand that this commitment is revocable and can be modified at any time. My/our legacy gift (which includes the organizations marked) is in the amount of It is my/our desire that the following (please estimate) \_\_\_\_\_ (amount will be kept confidential) and was completed organization(s) benefit from my/our gift. through (check one): If more than one, please include a check mark on the appropriate line: Bequest/Will Life Insurance Retirement Plan Assets (IRA) Charitable Remainder Trust Charlotte Jewish Day School \_ Congregation Ohr HaTorah Real Estate or Business Interest \_\_\_ Charlotte Jewish Preschool \_\_\_ Foundation of Shalom Park \_\_\_ Foundation for the Charlotte Jewish Community \_\_ Friendship Circle \_\_\_\_ Hebrew Cemetery Association NAME DATE OF BIRTH \_\_\_\_ Jewish Family Services \_\_\_\_ Jewish Federation of Greater Charlotte Levine Jewish Community Center ADDITIONAL NAME DATE OF BIRTH Moishe House \_\_ Temple Beth El \_\_\_ Temple Israel NAME(S) FOR FORMAL RECOGNITION (EX. "JOHN & JANE DOE", "JOHN DOE & JANE SMITH DOE", ETC.) \_\_\_ ZABS Place \_\_\_ Other **ADDRESS** CITY, STATE, ZIP **HOME PHONE MOBILE PHONE** Please return this Commitment form to a community partner organization **EMAIL ADDRESS** named above or mail to: You have my/our permission to share my/our legacy commitment with the Foundation for the Charlotte designated organizations. Jewish Community I/we would like my/our gift to remain anonymous at this time. 220 North Tryon Street You have my/our permission to recognize me/us in Book of Life. Charlotte, NC 28202 Attention: Abby Kleber Please have a FCJC staff member contact me/us for a confidential conversation regarding my/our legacy gift. Telephone: 704.973.4554 I/we understand that this commitment does not create a legal obligation and may be Submit form via email to: modified at my/our discretion. akleber@charlottejewishfoundation.org Support for Create Your Jewish **DONOR SIGNATURE** DATE Legacy Comes from Life &