## **LEGACY GIFT CONFIRMATION**

**Today, Tomorrow and TOGETHER.** 

I/We	
	NAME
of	
	CITY STATE
confirm that I/we have	ve legally provided for my commitment for the benefit of
following organization	on(s):
I/We confirm that I/we have made appropriate	O Bequest in Will
legal arrangements to assure that my/our legacy	O Beneficiary of a Life Insurance Policy
gift will be accomplished according to my/our	O Beneficiary of a Retirement Plan
wishes. My/Our commitment is acknowledged	O Charitable Gift Annuity (CGA)
within the following document:*	O Charitable Remainder Trust
	O Charitable Lead Trust
	O Cash Endowment Gift
* Please provide a copy of the pertinent pages to make sure that your wishes are met.	Other (please describe)
l am/We are pleased to be able to support the .	Jewish community in the Heart of New Jersey through I
	commitment will be \$ or or
of my/our estate.	
DONOR SIGNATURE	DATE
DONOR SIGNATURE	DATE
<b>OPTIONAL:</b> Assistance to provide for my legacy commit	itment given by (Please designate adviser):
My/Our estate planning attorney is:	Phone:
My/Our financial planner is:	Phone:
Other:	

For more information please contact: Paul Rovinsky, Director, Jewish Community Foundation at 732-588-1839 or paulr@jewishheartnj.org





