



LEHIGH VALLEY
JEWISH FOUNDATION

THE JEWISH COMMUNITY'S ENDOWMENT FUND
Jewish Federation of the Lehigh Valley

LEGACY GIFT CONFIRMATION

Thank you for your promise to provide for future generations and assure the continuity of Jewish services and programs in the Lehigh Valley. Please complete this form to confirm formalization of your gift.

I/we _____ of _____, _____
Name(s) City State

confirm that I/we have made the appropriate legal arrangements for my/our legacy gift.

Donor Signature _____ Date _____

Donor Signature _____ Date _____

I intend for the following organizations to benefit from my Legacy gift:

Please show the percentage or amount of your gift to each organization.

- | | |
|------------------------------------|--|
| _____ Congregation Am Haskalah | _____ Jewish Community Center of the Lehigh Valley |
| _____ Congregation B'nai Shalom | _____ Jewish Day School of the Lehigh Valley |
| _____ Congregation Brith Sholom | _____ Jewish Family Service of the Lehigh Valley |
| _____ Congregation Keneseth Israel | _____ Jewish Federation of the Lehigh Valley |
| _____ Congregation Sons of Israel | _____ Temple Beth El |

I have provided for this gift within my estate plan and confirm that I have made the appropriate formal arrangements to assure that this will be accomplished during my lifetime or at the time of my passing. My/our commitment is acknowledged within the following document:

Please list the amount or percentage.

- _____ Gift in my Will or Trust (*can be percentage, residual, or specific amount*)
- _____ Beneficiary of Retirement Plan, Administered by: _____
- _____ Beneficiary of Life Insurance Policy, Insurance Company: _____
- _____ Gift that provides lifetime income (*Charitable Gift Annuity or Charitable Remainder Trust*)
- _____ Gift that provides income to heirs (*Charitable Lead Trust*)
- _____ Real Estate, Personal Property, Securities or Cash
- _____ Other (*Please specify*) _____

Please provide a copy of the pertinent pages to ensure that your philanthropic wishes are met.



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Assistance to provide for my legacy commitment was given by:

Estate Planning Attorney: _____ Contact Information: _____

Financial Planner/Advisor: _____ Contact Information: _____

Other (Family Member, Executor, Trustee): _____

Contact Information: _____

PLEASE COMPLETE AND RETURN THIS FORM TO:

**Aaron Gorodzinsky
Director of Development
Jewish Federation of the Lehigh Valley
702 N. 22nd St.
Allentown, PA 18104
FAX: 610-821-8946
EMAIL: aaron@jflv.org**



Jewish Federation
OF THE LEHIGH VALLEY

Support for Lehigh Valley LIFE & LEGACY is provided by the Harold Grinspoon Foundation and the Jewish Federation of the Lehigh Valley



IN PARTNERSHIP WITH



Jewish Federation
OF THE LEHIGH VALLEY



Jewish Community Center
of the Lehigh Valley

**JEWISH
DAY SCHOOL**



JEWISH FAMILY SERVICE
OF THE LEHIGH VALLEY



**CONGREGATION
KENESETH ISRAEL**
A Caring Community



**CONGREGATION
B'NAI SHALOM**
קהילת ברית שלום



**Congregation
Am Haskalah**



**בני שלום
CONGREGATION B'NAI SHALOM**



Temple Beth El