

# Donor Advised Fund Application

## Name of Fund

THIS CAN BE YOUR FAMILY NAME (E.G. COHEN FAMILY FUND) OR A NEUTRAL NAME (E.G. TZEDEK FUND)

## Contact Information

**Fund Advisor(s):** Individual(s) has(have) full advisory privileges over a fund, including grant recommendations, investment recommendations (when applicable), naming of successor advisors, and other fund administration advisory privileges.

FIRST NAME

FIRST NAME

LAST NAME

LAST NAME

MAILING ADDRESS  HOME/PRIMARY  BUSINESS/SECONDARY

MAILING ADDRESS  HOME/PRIMARY  BUSINESS/SECONDARY

CITY STATE ZIP

CITY STATE ZIP

HOME/PRIMARY PHONE

HOME/PRIMARY PHONE

BUSINESS/SECONDARY PHONE

BUSINESS/SECONDARY PHONE

MOBILE PHONE

MOBILE PHONE

EMAIL

EMAIL

COMPANY NAME

COMPANY NAME

TITLE

TITLE

DATE OF BIRTH

DATE OF BIRTH

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## Fund Creation

Initial gift: \$ \_\_\_\_\_

### Type of gift:

- Cash or Check (check made payable to the Jewish Community Foundation)
- Publicly Traded Securities
- Privately Held Securities
- Restricted Securities
- Wire Transfer

- Other – Please contact us for complex transactions.  
PLEASE DESCRIBE THE GIFT (INTERFUND TRANSFER, CREDIT CARD, PERSONAL PROPERTY, REAL ESTATE, TESTAMENTARY):  
\_\_\_\_\_

For more information on complex transactions, please contact us at 323.761.8704 or [development@jewishfoundationla.org](mailto:development@jewishfoundationla.org).

## Recognition and Thanks

### How would you like to be recognized?

Each grant made from a donor advised fund is mailed with a custom grant award letter.

Specify below how you would like the name(s) of the fund advisors to appear in the custom grant award letter:

\_\_\_\_\_  
(E.G. MR. AND MRS. DAVID COHEN, SYLVIA AND DAVID COHEN, THE COHEN FAMILY)

- Please make all grants from the fund anonymous.  
*(Note: Anonymity can be customized on a grant-by-grant basis.)*

### How would you like to be thanked by nonprofits?

An organization that has received grants from the fund may wish to send information to you directly. Please indicate your contact preference for the custom grant letter.

Choose one:

- Provide my home/primary address.
- Provide my business/secondary address.
- Do not provide my address.

**Mail received by the Jewish Community Foundation for your fund will not be forwarded.**

## Referral Information

Please tell us if you were referred by someone so we can thank them.

REFERRED TO THE JEWISH COMMUNITY FOUNDATION BY \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_

COMPANY/TITLE \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

# Donor Advised Fund Application

## Signatures

I hereby certify, to the best of my knowledge, that all information presented within this form is accurate, and I will notify the Jewish Community Foundation promptly of any changes. By signing down below, I acknowledge all terms and conditions for my Donor Advised Fund. For more information on terms and conditions, investment program policies, and administrative procedures, please visit our website:

FUND NUMBER:

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FUND ADVISOR SIGNATURE

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NAME

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DATE

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FUND ADVISOR SIGNATURE

---

PRINT NAME

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DATE