

Legacy Gift Confirmation



I/We, _____, of _____, _____ confirm that I/we have
(Name) (City) (State)

legally provided for my/our commitment to the LIFE & LEGACY™ Program of the Greater Phoenix community (“LL”) for the benefit of the **Jewish Family & Children’s Service**, which will be held at the Jewish Community Foundation of Greater Phoenix (Tax ID # 47-0874376). I affirm that I have made appropriate legal arrangements to assure that this will be accomplished during my lifetime or upon my passing. My commitment is set forth within the following document:

- | | |
|---|-----------------------------------|
| ___ Last Will & Testament or Living Trust | ___ Charitable Remainder Trust |
| ___ IRA or other Retirement Plan | ___ Charitable Lead Trust |
| ___ Life Insurance Policy | ___ Charitable Gift Annuity (CGA) |
| ___ Other (please describe): _____ | |

I am/We are pleased to support the Greater Phoenix Jewish community through my/our legacy gift. The estimated value of my/our commitment will be \$ _____ or _____% of my/our estate.

Donor Signature

Date

Donor Signature

Date

OPTIONAL: Assistance to provide for my legacy commitment has been provided by the following:

My estate planning attorney is: _____ Phone: _____

My financial planner is: _____ Phone: _____

Other: _____

**If you have not already submitted confirmation of the completion of your legacy gift,
PLEASE COMPLETE & RETURN THIS FORM TO:**

Rachel Rabinovich
LIFE & LEGACY Program Director
Jewish Community Foundation of Greater Phoenix
12701 N. Scottsdale Road, Suite 202
Scottsdale, AZ 85254
480.699.1717
www.jcfphoenix.org