

Name(s):

Legacy Gift Confirmation

City:

State:

To benefit future generations, I/we declare this commitment to assure the continuity of Jewish services and programs in Pittsburgh and I/we affirm that I/we have made the following legal arrangements for my/our gift.

Email:		Phone:
	I/We intend for the following organiz	zation(s) to benefit from my/our legacy gift:
	Beth El Congregation of the South Hills Congregation Beth Shalom Community Day School The Friendship Circle of Pittsburgh Hillel Academy of Pittsburgh Holocaust Center of Pittsburgh Jewish Association on Aging Jewish Cemetery & Burial Asso. of Greater PGH Jewish Community Center of Greater Pittsburgh Jewish Family and Community Services Jewish Federation of Greater Pittsburgh	 □ Kollel Jewish Learning Center □ Mikvah - Jewish Women's League □ National Council of Jewish Women, Pittsburgh Section □ Rodef Shalom Congregation □ Temple Emanuel of South Hills □ Temple Ohav Shalom □ Temple Sinai □ The Branch (formerly Jewish Residential Serivces) □ Yeshiva Schools of Pittsburgh □ Other:
My/Our commitment is within the following document (optional): (Please list amount or percentage.)		
	Beneficiary of life insurance policy, Ir Cash endowment gift Gift that provides lifetime income (ch	nistered by: nsurance Company: charitable gift annuity or charitable remainder trust) naritable gift annuity or charitable lead or remainder trust) urities, specialty asset, business interest
Attorney, financial advisor, family member, executor or trustee for my/our gift is:		
Name:		Phone or Email:
Donor Signature:		Date:
Donor Signature:		Date:

Please complete and return this form to foundation@jfedpgh.org or Jewish Federation of Greater Pittsburgh, ATTN: Julia Och 2000 Technology Drive, Pittsburgh, PA 15219

