

Legacy Gift Confirmation

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.

Name(s): _____ City: _____ State: _____

Email: _____ Phone: _____

I/We intend for the following organization(s) to benefit from my/our legacy gift:

- | | |
|--|---|
| <input type="checkbox"/> Beth El Congregation of the South Hills | <input type="checkbox"/> Jewish Residential Services |
| <input type="checkbox"/> Congregation Beth Shalom | <input type="checkbox"/> Kollel Jewish Learning Center |
| <input type="checkbox"/> Community Day School | <input type="checkbox"/> Mikvah - Jewish Women's League |
| <input type="checkbox"/> The Friendship Circle of Pittsburgh | <input type="checkbox"/> National Council of Jewish Women, Pittsburgh Section |
| <input type="checkbox"/> Hillel Academy of Pittsburgh | <input type="checkbox"/> Rodef Shalom Congregation |
| <input type="checkbox"/> Holocaust Center of Pittsburgh | <input type="checkbox"/> Temple Emanuel of South Hills |
| <input type="checkbox"/> Jewish Association on Aging | <input type="checkbox"/> Temple Ohav Shalom |
| <input type="checkbox"/> Jewish Cemetery & Burial Asso. of Greater PGH | <input type="checkbox"/> Temple Sinai |
| <input type="checkbox"/> Jewish Community Center of Greater Pittsburgh | <input type="checkbox"/> Yeshiva Schools of Pittsburgh |
| <input type="checkbox"/> Jewish Family and Community Services | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Jewish Federation of Greater Pittsburgh | |

My/Our commitment is within the following document (optional):
(Please list amount or percentage.)

- _____ Gift in will or trust (can be percentage, residual or specific amount)
- _____ Beneficiary of retirement plan, Administered by: _____
- _____ Beneficiary of life insurance policy, Insurance Company: _____
- _____ Cash endowment gift
- _____ Gift that provides lifetime income (charitable gift annuity or charitable remainder trust)
- _____ Gift that provides income to heirs (charitable gift annuity or charitable lead or remainder trust)
- _____ Real estate, personal property, securities, specialty asset, business interest
- _____ Other: _____

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:
Cheryl Johnson | 412-697-6656 | cjohnson@jfedpgh.org