

## **LEGACY GIFT CONFIRMATION**

**Today, Tomorrow and TOGETHER.** 

Legacy	I/We			,
DELAWARE	NAME			
Jewish Federation OF DELAWARE	of	CITY	,s	TATE
LIFE &		re legally provided for my aware program for the b		
Assuring JEWISH TOMORROWS  A program of the HAROLD GRINSPOON FOUNDATION				
/We confirm that I/we hav		O Bequest in Will		
			Life Insurance Policy	/
gift will be accomplished according to my/our O Beneficiary of a			Retirement Plan	
wishes. My <mark>/Our commit</mark> ment is ac <mark>knowledged O Charitable Gift A</mark>			Annuity (CGA)	
within t <mark>he following document:* O Charitable Rema</mark>			ainder Trust	
		O Charitable Lead	Trust	
		O Cash Endowmer	nt Gift	
* Please provide a copy of the pe that your wishes are met.	rtinent pages to make sure	O Other (please de	escribe)	
am/We are pleased to b	e able to support the	Jewish community in D	Delaware through m	y/our legacy gift
The approximate value of r	my/our commitment wi	II be \$	or%	of my/our estate.
DONOR SIGNATURE			DATE	
DONOR SIGNATURE			DATE	
<b>OPTIONAL:</b> Assistance to pro	ovide for my legacy comm	itment given by (Please de	signate adviser):	
My/Our estate planning attorney is:			Phone:	
My/Our financial planner is: _				
Other:				

Create a Jewish Legacy is sponsored and presented by The Jewish Federation of Delaware and is a collaborative effort of the following area agencies and synagogues.















If you have not already submitted confirmation of your legacy gift, PLEASE COMPLETE & RETURN THIS FORM TO:
Create a Jewish Legacy, 101 Garden of Eden Rd., Wilmington, DE 19803