

CONFIRMATION OF COMMITMENT

In keeping with Jewish tradition, I/we wish to share my/our blessings with others.

I/We intend to leave a legacy gift and will formalize my/our gift within _____ months.

I/We have already included a legacy gift for the Jewish community in my/our estate plan.

My/Our legacy gift in the approximate amount of (\$ or %) _____ to the Tidewater Jewish community will be/was completed through (check one or more):

Life Insurance

Charitable Remainder/Lead Trust

Retirement Plan Assets/IRA

Bequest/Will

Other _____

Real Estate or Business Interest

NAME _____ DATE OF BIRTH _____

ADDITIONAL NAME _____ DATE OF BIRTH _____

NAME(S) FOR FORMAL RECOGNITION _____

ADDRESS _____

HOME PHONE _____ MOBILE PHONE _____

EMAIL ADDRESS _____

You have my/our permission to recognize me/us in the *Simon Family Legacy Society Book of Life*.

I/We would like my/our gift to remain anonymous at this time.

Please have a TJF staff member contact me/us for a confidential conversation regarding my/our legacy gift, whether or not it has been fully executed.

I/we understand that this commitment does not create a legal obligation and may be modified at my/our discretion.

DONOR SIGNATURE _____ DATE _____

ADDITIONAL DONOR SIGNATURE _____ DATE _____



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It is my/our desire that the following Life & Legacy approved organization(s) benefit from my/our gift:

(Check one or more) % or Amount (optional)

Beth Shalom Village

Chabad Lubavitch of Tidewater

Congregation Beth El

Jewish Family Service of Tidewater

Ohel Shalom Temple

Simon Family JCC

Strelitz International Academy

Temple Emanuel

Tidewater Jewish Foundation

United Jewish Federation Of Tidewater

Other

Please return this form to:
Tidewater Jewish Foundation
5000 Corporate Woods Drive,
Suite 200
Virginia Beach, VA 23462

Attention:
Naomi Sedek
President & CEO
nsedek@ujft.org