



## Donor Letter of Intent

By Creating a Jewish Legacy, I/we confirm my/our belief in the future of the Western Massachusetts Jewish community. This Letter of Intent indicates the heartfelt promise that my/our estate plan includes or will include instructions to provide for the support of one or more Jewish charitable organizations through a bequest or through the establishment of a permanent endowment with the Jewish Endowment Foundation of Western Massachusetts.

### It is with deep satisfaction that:

- I/we have already included the Jewish community in my/our estate plan.
- I/we intend to include the Jewish community in my/our estate plan during the next \_\_\_\_\_ (1-12) months.

### My/our commitment is to the following organizations(s):

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### My/our commitment shall be in the form of:

- |   |   |
|---|---|
| <input type="checkbox"/> Bequest in will                                    | <input type="checkbox"/> Charitable Gift Annuity    |
| <input type="checkbox"/> Beneficiary of IRA or other retirement plan        | <input type="checkbox"/> Charitable Remainder Trust |
| <input type="checkbox"/> Gift of real estate, securities, or other property | <input type="checkbox"/> Donor Advised Fund         |
| <input type="checkbox"/> Life Insurance Policy or beneficiary thereof       | <input type="checkbox"/> Other _____                |

### Amount of Gift – Please choose one of the following two options:

- The approximate value of my/our commitment will be \$\_\_\_\_\_ or \_\_\_\_% of my/our estate.
- I/we prefer to keep the details of this commitment confidential

### Documentation:

- Yes, I/we will share a copy of the portion of my/our estate plan that applies to the Jewish community, or the trust agreement or Change of Beneficiary Form in which the Jewish community of Western Massachusetts is named.

Name(s): \_\_\_\_\_ Date(s) of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Email Address(es): \_\_\_\_\_



**Participating Agencies/Organizations** (Please indicate either the dollar amount or percentage of your legacy gift below, the amount should match the value on the first page.)

_____ %	Beit Ahavah synagogue (Northampton)	\$ _____
_____ %	Congregation B'nai Israel (Northampton)	\$ _____
_____ %	Congregation B'nai Torah (Longmeadow)	\$ _____
_____ %	Congregation Sons of Zion (Holyoke)	\$ _____
_____ %	Greater Springfield Chapter of Hadassah	\$ _____
_____ %	Heritage Academy (Longmeadow)	\$ _____
_____ %	Hevreh of the Berkshires	\$ _____
_____ %	Hillel House at the University of Massachusetts	\$ _____
_____ %	Jewish Community of Amherst	\$ _____
_____ %	Jewish Family Service of Western Massachusetts	\$ _____
_____ %	Jewish Federation of the Berkshires	\$ _____
_____ %	Jewish Federation of Western Mass. (JFWM)	\$ _____
_____ %	Jewish Geriatric Services (Longmeadow)	\$ _____
_____ %	Lander~Grinspoon Academy (Northampton)	\$ _____
_____ %	Lubavitcher Yeshiva Academy (Longmeadow)	\$ _____
_____ %	Rachel's Table, a program of JFWM	\$ _____
_____ %	Sinai Temple (Longmeadow)	\$ _____
_____ %	Springfield Jewish Community Center	\$ _____
_____ %	Temple Beth El (Springfield)	\$ _____
<b>_____ 100%</b>	<b>Total</b>	<b>\$ _____</b>

**Privacy Statement & Authorization for Use of Name - Please choose one of the following:**

- To encourage others to make commitments to the future, I/we permit my/our name(s) to be listed in marketing materials of Create a Jewish Legacy and the Jewish Endowment Foundation. I/we understand that while names(s) may be listed, the type and amount of the gift will remain strictly confidential. My/our name(s) should appear as:  
\_\_\_\_\_
- I/We prefer to remain anonymous.

**Donor Signature(s):** \_\_\_\_\_ **Date:** \_\_\_\_\_

\_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed Name(s):** \_\_\_\_\_ **Date:** \_\_\_\_\_

\_\_\_\_\_ **Date:** \_\_\_\_\_

Neither the *Create a Jewish Legacy of Western Massachusetts* program nor its participating agencies are engaged in rendering legal or tax advisory services. Individuals considering gifts to *Create a Jewish Legacy of Western Massachusetts* participating organizations should obtain the services of a financial adviser, such as an attorney, certified public accountant, and/or chartered life underwriter.