



Donor Advised Fund Check Request

Donor Name: _____ Date: _____

Fund Name: _____

Fund Number: _____

Check Payable to: _____

(501(C)3 organizations only)

Tax ID Number: _____ Amount: _____

Organization Address: _____

Organization Phone Number: _____

Special Instructions: _____

Donor Signature: _____

Donor Phone Number: _____

How to Submit a Request:

- Complete and email to karnold@jewishakron.org
- The form can be printed, completed and mailed to JCBA-DAF Requests, 750 White Pond Drive Akron, Ohio 44320.

Please make sure to fill out the form completely and clearly and include your signature (requests that are not signed cannot be processed.) Incomplete information will cause a delay in payment.

Please note that distributions are permitted only to non-profit organizations granted a 501(c)3 status by the IRS. Tax-exempt status will be verified before your donation is mailed. If you have the charitable organization's Federal Tax ID Number, please provide it on the check request form to expedite your payment.

Accounting Use Only: Endowment Check #: _____ Date Completed: _____