



# LEGACY GIFT FORMALIZATION



I/We \_\_\_\_\_ confirm that I have legally provided for my commitment to the Jewish Federation of Greater Indianapolis LIFE & LEGACY™ program for the benefit of the organizations listed below.

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

Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Email: \_\_\_\_\_

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

Partner Organization(s)	Gift Vehicle	Estimated % or \$
<input type="checkbox"/> Bureau of Jewish Education	_____	_____
<input type="checkbox"/> Chabad/Lubavitch of Indiana	_____	_____
<input type="checkbox"/> Congregation Beth-El Zedeck	_____	_____
<input type="checkbox"/> Congregation B'nai Torah	_____	_____
<input type="checkbox"/> Congregation Shaarey Tefilla	_____	_____
<input type="checkbox"/> Etz Chaim Sephardic Congregation	_____	_____
<input type="checkbox"/> Hasten Hebrew Academy of Indianapolis	_____	_____
<input type="checkbox"/> Hillel Foundation at Indiana University	_____	_____
<input type="checkbox"/> Hooverwood	_____	_____
<input type="checkbox"/> Indianapolis Hebrew Congregation	_____	_____
<input type="checkbox"/> Jewish Community Center of Indianapolis	_____	_____
<input type="checkbox"/> Jewish Community Relations Council	_____	_____
<input type="checkbox"/> Jewish Family Services	_____	_____
<input type="checkbox"/> Jewish Federation of Greater Indianapolis	_____	_____
<input type="checkbox"/> Other _____	_____	_____

We would appreciate a copy of the pertinent pages to make sure that your wishes are met.

**GIFT VEHICLE OPTIONS:**

**Bequest** in Will or Trust  
 Life **Insurance** Policy  
 Beneficiary of a **Retirement** Plan

Gift of **Real Estate, Securities** or **property**  
 **Other** (please specify)

All gifts will be treated as unrestricted endowment funds for the designated LIFE & LEGACY partner organization(s) unless otherwise indicated below. Other options are: special purpose or name endowments, Perpetual Annual Campaign Endowment (PACE), or Lion of Judah Endowment (LOJE).

I give my permission to share the financial information contained in this document with the organizations that I have designated.



*“As my ancestors planted for me, so do I plant for those who will come after me.”*  
 - TALMUD

**OPTIONAL:**

Please indicate if you plan to fulfill your legacy gift during your lifetime.

Please indicate any legacy gifts made to a partner organization prior to the beginning of the LIFE & LEGACY program August, 2015.

Partner Organization(s)	Gift Vehicle	Estimated % or \$
_____	_____	_____
_____	_____	_____
_____	_____	_____

Assistance to provide for my legacy commitment may be given by:

Estate planning attorney: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_  
 Financial advisor: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_  
 Other: (family member, Executor, trustee) \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_

*Thank you for your commitment and generosity through your LIFE & LEGACY Letter of Intent, which ensures that Indianapolis will have a vibrant Jewish future for generations to come.*



LIFE & LEGACY™ is presented by the Jewish Federation of Greater Indianapolis in partnership with the Harold Grinspoon Foundation.

PLEASE COMPLETE & RETURN THIS FORM TO:  
 Jewish Federation of Greater Indianapolis, 6705 Hoover Road, Indianapolis, IN 46260

JEWISH FEDERATION OF GREATER INDIANAPOLIS IS HERE TO ASSIST YOU IN FULFILLING YOUR PHILANTHROPIC GOALS  
 Contact Paula Goldberg at 317.726.5450 or visit us at <https://www.jewishindianapolis.org> for more information.