# **FUND DISTRIBUTION FORM**

Recommendations are due by the 1st and 15th of each month and checks are mailed within five business days of the 1st and 15th.



	DATE	:
	FUND Name	:
	,	:
	(Please Print	t)
•		e Jewish Federation and the Jewish Community Foundation of Greater Long unty pay the following:
RECOMIV	MENDATION 1: Amou	unt: (Minimum Grant \$50 ∼ Increments of \$5) \$
Nam	e of Charitable	
		Reference:
RECOMM	1ENDATION 2: Amou	unt: (Minimum Grant \$50 ~ Increments of \$5) \$
Nam	e of Charitable Organization:	
		Reference:
RECOMIV	MENDATION 3: Amou	unt: (Minimum Grant \$50 ~ Increments of \$5) \$
Nam	e of Charitable	
	Address:	Reference:
RECOMM	MENDATION 4: Amou	unt: (Minimum Grant \$50 ~ Increments of \$5) \$
Nam	e of Charitable Organization:	
	Address:	Reference:
RECOMIV	MENDATION 5: Amou	unt: (Minimum Grant \$50 ~ Increments of \$5) \$
Nam	e of Charitable Organization:	
	Address:	Reference:

I represent that I have not received, nor will receive, any benefits (i.e. dinners, tickets, etc.) in connection with such distribution.

SIGNATURE OF DONOR	Supervisor	

## **DOWNLOAD INSTRUCTIONS**

In order to fill out the Fund Distribution Form, please save this document in PDF format on your desktop.

When you have finished filling out & saving this Fund Distribution Form on your computer, please email your Fund Distribution Form to:

#### **Wes Ferris**

Director of Finance wferris@jewishlongbeach.org

If you have additional questions, please contact a member of the Jewish Federation & Jewish Community Foundation's Professional Staff:

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