

Donor Advisor Distribution Form

I suggest distribution(s) from _____ to the following organization(s):

 Name of Fund

_____ dollars
 \$

Organization Name

_____ dollars
 Address Please write out dollar amount

_____ dollars
 City, State, Zip Memo, if needed

_____ dollars
 \$

Organization Name

_____ dollars
 Address Please write out dollar amount

_____ dollars
 City, State, Zip Memo, if needed

I understand that grants from the Community Foundation of New Jersey cannot provide personal benefits to the fund advisor or any other individual. Examples include: satisfaction of a fund advisor's enforceable pledge; nondeductible portion of the cost of events and memberships; tuition; and goods at a charitable auction. Additionally, I understand that grants cannot be made for lobbying purposes or to support political campaigns. My signature on this recommendation form signifies compliance with these guidelines.

Signature _____ Date _____

- Please return white copy to the Community Foundation of New Jersey
- Retain the yellow copy for your files
- Following approval of your request(s), a notification letter and check bearing the name of your fund will be sent to the recipient(s)
- We will notify you as distributions are made
- Copies of this form are available online at www.cfnj.org

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