

GRANT RECOMMENDATION FORM

Philanthropic Funds Committee ▪ Ben Gurion Way ▪ Jewish Federation of Metropolitan Chicago
 30 South Wells Street ▪ Chicago, Illinois 60606
 Fax: (312) 855-3284 · Email: philanthropicfund@juf.org



Account Information

Philanthropic Fund Name

Account Number

Grant Recommendation: Pursuant to the terms of the Philanthropic Fund which I have established at the Jewish Federation of Metropolitan Chicago, I hereby suggest that you pay the income of the Fund, and from the principal thereof to the extent that the Fund's income is not sufficient for such purposes, the following amounts to the following organizations:

Office Use Only	1	Jewish United Fund of Metro. Chicago <hr/> <small>ORGANIZATION'S NAME</small> 30 South Wells Street <hr/> <small>ORGANIZATION'S ADDRESS</small> Chicago IL 60606 <hr/> <small>CITY STATE COUNTRY ZIP CODE PHONE NUMBER</small>	\$ <hr/> <small>GRANT AMOUNT (\$100 MINIMUM)</small> <hr/>
A0001			
FUND #			
	2	<hr/> <small>ORGANIZATION'S NAME</small> <small>BRANCH/CHAPTER</small> <hr/> <small>ORGANIZATION'S ADDRESS</small> <hr/> <small>CITY STATE COUNTRY ZIP CODE PHONE NUMBER</small>	\$ <hr/> <small>GRANT AMOUNT (\$100 MINIMUM)</small> <hr/> <small>SPECIAL PURPOSE</small> <hr/>
	3	<hr/> <small>ORGANIZATION'S NAME</small> <small>BRANCH/CHAPTER</small> <hr/> <small>ORGANIZATION'S ADDRESS</small> <hr/> <small>CITY STATE COUNTRY ZIP CODE PHONE NUMBER</small>	\$ <hr/> <small>GRANT AMOUNT (\$100 MINIMUM)</small> <hr/> <small>SPECIAL PURPOSE</small> <hr/>
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Signature The above suggested distribution does not represent the payment of any pledge or other financial obligation. If any benefits or privileges are offered in connection with such distribution(s), I have not accepted and will not accept them.

Signature

Print Name

Date