



“As my ancestors planted for me, so do I plant for those who will come after me.” ~Talmud
Accordingly, it is with deep satisfaction that I share that...

- I have already made a legacy provision
- I shall make a legacy provision during the next _____ months (must be 12 or less)

I wish to support the following Northeastern New York institutions: (check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Sidney Albert Albany Jewish Community Center | <input type="checkbox"/> Hebrew Academy of the Capital District |
| <input type="checkbox"/> Congregation Berith Sholom | <input type="checkbox"/> Jewish Federation of Northeastern New York |
| <input type="checkbox"/> Congregation Beth Abraham-Jacob | <input type="checkbox"/> Robert and Dorothy Ludwig Schenectady Jewish Community Center |
| <input type="checkbox"/> Congregation Beth Emeth | <input type="checkbox"/> Temple Sinai |
| <input type="checkbox"/> Congregation Gates of Heaven | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Congregation Ohav Shalom | |
| <input type="checkbox"/> Daughters of Sarah Senior Community | |

With an endowment fund established through a:

- | | |
|---|---|
| <input type="checkbox"/> Bequest in my will or trust | <input type="checkbox"/> Life Insurance Policy |
| <input type="checkbox"/> Remainder of IRA or other retirement plan | <input type="checkbox"/> Charitable Remainder Trust |
| <input type="checkbox"/> Gift of real estate, securities or other property | <input type="checkbox"/> Donor-Advised Fund beneficiary designation |
| <input type="checkbox"/> Charitable Gift Annuity or other income producing gift | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> I wish to establish an endowment now with a current gift of cash or property | |

Amount of Gift – Please choose one of the following two options:

- The approximate value of my/our commitment will be \$_____ or ____% of my/our estate.
- I/we prefer to keep the details of this commitment confidential.

Privacy Statement:

To encourage others to make commitments to the future names are listed in printed materials and/or on community organization websites:

- I permit my name to be listed. _____
- I prefer to remain anonymous. *(My name should appear as)*

Name(s): _____

Address: _____

City/State/Zip: _____

Phone: _____ Email: _____

I understand that this letter of intent is not a legal obligation and may be changed at my discretion at any time.

Signed _____

Date _____

Signed _____

Date _____

Contacted by: _____

The Jewish Federation of Northeastern New York's professional staff can assist in creating endowed gifts. Please contact us with any questions or to establish your legacy. Together, we guarantee a Jewish tomorrow.