New Endowment Fund

Please type or print your information. * Required information.

* **Name of New Fund:** _____

Donor Profile

Donor Information

* Donor Name: _____ Donor Nickname: _____

* Email Address: _____ * Birthday: _____

* Home Address: _____

* City: _____ * State: _____ * Zip: _____

* Home Phone: _____ Cell Phone: _____

Place of Work: _____ Office Phone: _____

Title/Profession: _____

Spouse Information

Spouse Name: _____ Spouse Nickname: _____

Email Address: _____ Birthday: _____

Place of Work: _____ Cell Phone: _____

Wedding Anniversary: _____ Office Phone: _____

Title/Profession: _____

Designation of Charitable Beneficiaries

Designee Info

Organization Name: Address: Purpose: Distribution %

_____

Designation of Charitable Beneficiaries

Designee Info

Organization Name: Address: Purpose: Distribution %

Organization Name: Address: Purpose: Distribution %

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Organization Name: Address: Purpose: Distribution %

Organization Name: Address: Purpose: Distribution %

Organization Name: Address: Purpose: Distribution %

Organization Name: Address: Purpose: Distribution %

* Opening Gift Amount: _____

* Asset being used for opening gift:

☐ Stock ☐ Bond ☐ Fund ☐ Cash ☐ Check

☐ Other Assets *(please specify):* _____

* Publication Permission

☐ I, the Donor, grant the Foundation permission to publish the name of the Fund for purposes of publicizing the Foundation's activities and programs.

☐ I, the Donor, do NOT grant the Foundation permission to publish the name of the Fund.

Donor Signature _____ Date _____

Printed Donor Name _____

Name of the person filling out the form _____

Please email this completed form to ssanders@djcf.org.
If you have any questions, please contact Shalon Sanders at 972-645-1023.