

My Legacy

It is with deep satisfaction and an abiding commitment to my community that I sign this declaration in order to provide for future generations and assure continuity of services and programs in our Jewish community.

Please Choose One

- ☐ I/We have included a legacy gift for the Jewish community in my/our estate plan.
- OR
- ☐ I/We will leave a legacy gift and will formalize my/our gift within _____ months.

Name _____

Date of Birth (optional) _____

Additional Name _____

Date of Birth (optional) _____

Address _____

City _____

State _____ Zip _____ Phone _____

Mobile Phone _____

Email _____

My/our gift to the Jewish community will be/was completed through a:

- | | |
|-------------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> Bequest/Will | <input type="checkbox"/> Retirement Plan Assets (IRA) |
| <input type="checkbox"/> Donor Advised Fund | <input type="checkbox"/> Charitable Gift Annuity |
| <input type="checkbox"/> Gift of Life Insurance | <input type="checkbox"/> Distribution from trust |
| <input type="checkbox"/> Other _____ | |

- ☐ I/We permit my/our name(s) and/or photographs to be included in materials to inspire and encourage others to make commitments to Jewish causes for the future.

My/our names should appear as follows:

- ☐ I/We prefer to remain anonymous.

Optional

- ☐ I/We intend to leave \$ _____ or _____ % of my/our estate/ inheritable assets.

Please share any additional comments: _____

I understand that my commitment is not a legal obligation and can be changed at my discretion.

Signature _____ Date _____

It is my/our desire that the following cohort partner organization(s) benefit from my/our gift:

- ☐ Adath Jeshurun Foundation
- ☐ Beth Jacob Congregation
- ☐ Heilicher Minneapolis Jewish Day School
- ☐ Jewish Community Action
- ☐ Jewish Community Relations Council of Minnesota and the Dakotas
- ☐ Jewish Family and Children's Service of Minneapolis
- ☐ Jewish Family Service of St. Paul
- ☐ Jewish Federation of Greater St. Paul
- ☐ Minneapolis Jewish Federation
- ☐ Mount Zion Temple
- ☐ National Council of Jewish Women Minnesota
- ☐ Shir Tikvah
- ☐ Temple Israel
- ☐ Temple of Aaron
- ☐ Torah Academy

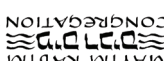
It is my/our desire that the following audit partner organization(s) benefit from my/our gift:

- ☐ Herzl Camp
- ☐ Jewish Community Center of the Greater St. Paul Area
- ☐ Keneseth Israel
- ☐ Lubavitch Cheder Day School
- ☐ Mayim Rabim Congregation
- ☐ Minnesota Hillel
- ☐ Sabes Jewish Community Center
- ☐ Sharei Chesed
- ☐ Sholom Foundation
- ☐ Yeshiva of Minneapolis

- ☐ Other _____
- ☐ Other _____
- ☐ Other _____

The Jewish Federation of Greater St. Paul, the Minneapolis Jewish Federation, and their partner agencies are not engaged in rendering legal or tax advisory services. Individuals considering gifts to these agencies should obtain the services of a financial advisor, such as an attorney, a certified public accountant, a certified financial planner, and/or a chartered life underwriter.

St. Paul JCC



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952.417.2322
jewishlifelegacy.org
jewishincities.org
jewishincities.org/legacy
Jewish Federation of Greater St. Paul
790 Cleveland Ave S., Suite 227
St. Paul, MN 55116
Minneapolis Jewish Federation
13100 Wayzata Boulevard, Suite 200
Minnetonka, MN 55305

Please return a copy of your promise to the community partner(s) designated here or to:

Thank you

IT'S YOUR LEGACY
Your life. Your community. Your legacy.

My Legacy

In the tradition of those who came before me, I affirm that I am providing for the future needs of our local Jewish community through a legacy gift, as described in this document. While not a legal document, this commitment indicates my heartfelt promise to provide for the support of the Jewish charitable causes that are important to me. By creating my Jewish legacy, I will be leaving a meaningful imprint on our community for generations to come.

