



DISTRIBUTION RECOMMENDATION FORM

Your Name: _____

Name of Fund: _____

Name(s) of Advisor(s): _____

Pursuant to the terms of the above-references Named Fund which I have established at the Catholic Foundation of Greater Philadelphia, I would like to recommend that the income and/or principal available for distribution from such Fund be distributed to the following organizations or for the following charitable purposes, in the following amount. None of the following recommendations is being made to satisfy a pledge or some other legal obligation, and I certify that I have not and will not accept any benefits or privileges offered in connection with such distributions.

Name of Organization/Charitable Purpose: _____

Address of Organization and Tax ID #: _____

Designated Use by Organization: _____

_____ Please notify the above organization(s) that this contribution is made on the Recommendation of the above Donor-Advised Fund.

_____ Please keep the source of the contribution anonymous

Signature: _____ Date: _____

MAIL, FAX, OR E-MAIL THIS FORM TO:

The Catholic Foundation of Greater Philadelphia
100 North 20th Street, Philadelphia, PA 19103
Fax: 215-587-2442
E-mail: contactus@catholicfoundationphila.org

