



Community Fund Suggestion Form

Date: _____

I suggest distribution from the _____ **FUND** to the following organization(s) in the amount(s) listed below.

| Organization <small>(Please include address and phone number if you choose 501(c)(3) organizations that may not be on our database)</small> | Special Instructions <small>(Please indicate if there is a specific project or program, or if you wish to remain anonymous)</small> | Amount <small>(Subject to final board approval)</small> |
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I acknowledge that the above suggestion(s) does (do) not represent the payment of any pledge or other financial obligation, nor do I, or my appointees, or any related parties expect any personal benefit from this charitable distribution.

(Signature)

(Printed Name)

(Address)

(Zip Code)

(Phone Number)

The Board of Trustees has final authority over all distributions. Should the Board have any questions about your suggestion(s), a member of our staff will contact you.

Please return this form to the Community Foundation of the Holland/Zeeland Area and keep a copy for your files. A notification letter will be sent to the recipient(s) and a check will be mailed with our next regular check processing.