

**BAY AREA**

**FUND NAME** \_\_\_\_\_ **FUND NUMBER** \_\_\_\_\_

*Please make the following additions/changes to my fund:*

**DISPOSITION OF DONOR-ADVISED FUND ASSETS**

After the death, resignation, or inability to act of the last of the named Fund Advisor(s), any remaining Fund assets shall be disposed of as provided below:

**GRANTS (for more than five grants, please attach another page)**

<b>Organization Name</b>	<b>Amount</b>	<b>Purpose</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Fund Advisor Name: \_\_\_\_\_

Fund Advisor Name: \_\_\_\_\_

Fund Advisor Signature: \_\_\_\_\_

Fund Advisor Signature: \_\_\_\_\_

Accepted By:

Federation Name: \_\_\_\_\_

Federation Title: \_\_\_\_\_

Federation Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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