

By creating my Jewish legacy, I confirm my commitment to support the Jewish organization(s) that have been important to me in my life, to help them endure and thrive for future generations.

### Legacy Gift Plan

My legacy gift to Cincinnati's Jewish community will be in the approximate amount of \$\_\_\_\_\_ or \_\_\_\_% of one or more of the following:

- Estate (bequest in will or trust)
- IRA or other retirement plan
- Charitable trust or philanthropic fund
- Life insurance policy
- Other: \_\_\_\_\_

### I plan to make this gift to the following organization(s):

- |                                                                  | % or Amount<br><i>(Optional)</i> |
|------------------------------------------------------------------|----------------------------------|
| <input type="checkbox"/> Adath Israel Congregation               | _____                            |
| <input type="checkbox"/> Camp Livingston                         | _____                            |
| <input type="checkbox"/> Cedar Village Foundation                | _____                            |
| <input type="checkbox"/> Cincinnati Community Kollel             | _____                            |
| <input type="checkbox"/> Cincinnati Hebrew Day School            | _____                            |
| <input type="checkbox"/> Cincinnati Hillel                       | _____                            |
| <input type="checkbox"/> Congregation Beth Adam                  | _____                            |
| <input type="checkbox"/> Congregation Etz Chaim                  | _____                            |
| <input type="checkbox"/> Congregation Sha'arei Torah             | _____                            |
| <input type="checkbox"/> Congregation Zichron Eliezer            | _____                            |
| <input type="checkbox"/> Halom House                             | _____                            |
| <input type="checkbox"/> Hillel at Miami University              | _____                            |
| <input type="checkbox"/> Holocaust and Humanity Center           | _____                            |
| <input type="checkbox"/> JEEP! Jewish Education for Every Person | _____                            |
| <input type="checkbox"/> Jewish Cemeteries of Greater Cincinnati | _____                            |
| <input type="checkbox"/> Jewish Family Service                   | _____                            |
| <input type="checkbox"/> Jewish Federation of Cincinnati         | _____                            |
| <input type="checkbox"/> JVS Career Services                     | _____                            |
| <input type="checkbox"/> K.K. Bene Israel/Rockdale Temple        | _____                            |
| <input type="checkbox"/> Mayerson JCC                            | _____                            |
| <input type="checkbox"/> Northern Hills Synagogue                | _____                            |
| <input type="checkbox"/> Rockwern Academy                        | _____                            |
| <input type="checkbox"/> Temple Sholom                           | _____                            |
| <input type="checkbox"/> The Valley Temple                       | _____                            |
| <input type="checkbox"/> Other: _____                            | _____                            |

### Recognition

We would like to publicly recognize you for your generosity (amounts or percentages will not be disclosed):

Name(s) for formal recognition:

\_\_\_\_\_

- No thanks, I prefer not to be recognized.  
*The designated organization(s) will be notified.*

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

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

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Email Address(es): \_\_\_\_\_

\_\_\_\_\_

- I will formalize and document my Legacy Gift Plan within \_\_\_\_ months of signing this Letter of Intent.**

- I have already formalized and documented my Legacy Gift Plan.**

**I understand this Letter of Intent is not a legally binding agreement and I may amend or modify it at any time.**

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

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

**Please return to a CYJL organization or:**

Create Your Jewish Legacy / Jewish Federation of Cincinnati  
8499 Ridge Road / Cincinnati, OH 45236