



The Growing a Greater Tomorrow Fund
Distribution Request

Name: _____

Address: _____

Phone #: _____ Email: _____

My check is attached Please use my Charitable Checking or Donor Advised Fund

Fund Name (if Applicable): _____

Total check amount \$_____ to be distributed as follows:

Name of Organization: _____

Amount to be matched: \$_____

Name of Organization: _____

Amount to be matched: \$_____

Name of Organization: _____

Amount to be matched: \$_____

Name of Organization: _____

Amount to be matched: \$_____

Name of Organization: _____

Amount to be matched: \$_____

_____ Please check if you wish for the contribution(s) to remain anonymous.

- I understand that this is a recommendation only, and not a direction. In addition, I acknowledge that the above suggestions do not represent the payment of any pledge or other financial obligation, nor does the undersigned expect any personal benefit from this charitable distribution.

Signature: _____ Date: _____