



# DONOR PASS-THROUGH GIFT FORM

I/We \_\_\_\_\_ would like this recent donation of \_\_\_\_\_ to be given out right away/passed-through to the following organizations:

<p><b><u>For Foundation Use Only</u></b></p> <p>Auth: Yes/No _____</p> <p>IRS/ Non-Profit? _____</p> <p>FIMS Grantee #: _____</p> <p>Check #: _____</p> <p>Check Amount: \$ _____</p> <p>Date: _____</p>	<p>Does this grant satisfy a pledge? Yes _____ No _____</p> <p>Charitable Organization: _____</p> <p>Address: _____</p> <p>Suggested Amount of Gift: _____</p> <p>Restricted Purpose (if any): _____</p> <p><b>I/We prefer this grant be anonymous: Yes/No</b></p>
<p><b><u>For Foundation Use Only</u></b></p> <p>Auth: Yes/No _____</p> <p>IRS/ Non-Profit? _____</p> <p>FIMS Grantee #: _____</p> <p>Check #: _____</p> <p>Check Amount: \$ _____</p> <p>Date: _____</p>	<p>Does this grant satisfy a pledge? Yes _____ No _____</p> <p>Charitable Organization: _____</p> <p>Address: _____</p> <p>Suggested Amount of Gift: _____</p> <p>Restricted Purpose (if any): _____</p> <p><b>I/We prefer this grant be anonymous: Yes/No</b></p>
<p><b>Thank you for considering a gift to The Community Foundation.</b></p>	<p>Gift of \$ _____ to Philanthropy Fund</p> <p>Gift of \$ _____ to Community Endowment (a permanent fund to help finance projects that benefit our community, gifts currently qualify for a 25% match)</p> <p>Gift of \$ _____ to Valley Arts and Culture Fund</p>

**I/We acknowledge that in exchange for the above recommendations, we do not expect any personal benefits from these charitable pass-through gifts. Example: Tickets to events, parking privileges...**

We understand that the final judgment rests with the Board of Directors whose charge is to see that all distributions affirm the charitable purposes for which the fund was created and are within the broad charitable purposes of The Community Foundation.. We understand The Community Foundation's fee for this service is 1% of the gift amount (\$100 minimum).

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Mail, email or fax to:  
The Community Foundation  
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