



## DONOR ADVISED FUND RECURRING GRANT RECOMMENDATION

<b>DONOR ADVISED FUND NAME</b>

<b>RECOMMENDED GRANT(S)</b> <i>(Identify the charities you wish to support)</i>							
<b>Charitable organization name</b>			<b>For the ministries of/project fund</b>			<b>Gift Amount</b>	<b>Stay anonymous?</b>
						\$	<input type="checkbox"/> Yes / <input type="checkbox"/> No
<b>Start:</b>		<b>End:</b>		<b>Frequency:</b>	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Biannually <input type="checkbox"/> Annually		
<b>Charitable organization name</b>			<b>For the ministries of/project fund</b>			<b>Gift Amount</b>	<b>Stay anonymous?</b>
						\$	<input type="checkbox"/> Yes / <input type="checkbox"/> No
<b>Start:</b>		<b>End:</b>		<b>Frequency:</b>	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Biannually <input type="checkbox"/> Annually		
<b>Charitable organization name</b>			<b>For the ministries of/project fund</b>			<b>Gift Amount</b>	<b>Stay anonymous?</b>
						\$	<input type="checkbox"/> Yes / <input type="checkbox"/> No
<b>Start:</b>		<b>End:</b>		<b>Frequency:</b>	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Biannually <input type="checkbox"/> Annually		
<b>Charitable organization name</b>			<b>For the ministries of/project fund</b>			<b>Gift Amount</b>	<b>Stay anonymous?</b>
						\$	<input type="checkbox"/> Yes / <input type="checkbox"/> No
<b>Start:</b>		<b>End:</b>		<b>Frequency:</b>	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Biannually <input type="checkbox"/> Annually		

<b>ADDITIONAL INFORMATION</b> <i>(Include any special instructions)</i>

By signing below, I/we acknowledge that:

- my/our recommendation(s) are provided in an advisory role only. Legacy Ministry Services (Legacy) will make every effort to honor my/our recommendation(s), but I/we understand that the funds are the property of Legacy.
- this grant(s) is not intended: (1) to reference the fulfillment of a pledge that I have already made in my name or the name of the church or ministry organization; (2) to pay for memberships or tickets to galleries, museums, or public broadcasting station, goods at charitable auctions, school tuition, benefit events, or other goods or services; (3) to benefit myself or a specific individual; (4) to support political campaigns or for lobbying activities; or (5) to support a private non-operating foundation and/or some supporting organizations.
- I/we received a tax-deductible gift receipt for donating to the above-named Donor Advised Fund. Therefore, any subsequent receipt issued by the grant recipient will not be used as a charitable deduction.
- I/we have read the original "Donor Advised Fund Agreement."

Signature \_\_\_\_\_  
 Print Name \_\_\_\_\_  
 Date \_\_\_\_\_

Signature \_\_\_\_\_  
 Print Name \_\_\_\_\_  
 Date \_\_\_\_\_

**Please send completed forms to:**  
 Legacy Ministry Services, 2250 Chaney Rd., Dubuque, IA 52001  
 info@bssmatters.com