



Account Number: _____

FJC INDIVIDUAL/FAMILY DONOR LETTER AGREEMENT

Dear FJC:

This is a letter agreement between the undersigned Donor(s) and FJC to establish a Donor Advised Fund under and subject to the FJC Procedures for the Operation of Donor Advised Funds, as these procedures may be amended from time to time. I (we) acknowledge that I (we) have received and read the Summary of Procedures and Rules for Donor Advised Funds.

The name of my (our) fund will be the _____ Fund ("the Fund").

I (we) acknowledge that FJC shall have all of the powers needed to carry out its purposes including, without limitation, the following:

- (1) to receive from the Donor(s), or other persons or entities, additional gifts to the Fund;
- (2) to keep, sell, invest and reinvest the assets contributed;
- (3) to commingle for investment purposes the assets contributed, and
- (4) to distribute the contributed assets to organizations within the scope of its guidelines.

I (we) shall have the privilege of making written recommendations with respect to investments of, and distributions from, the Fund. However, I (we) acknowledge that, in accordance with Internal Revenue Service rules and regulations, FJC shall be the absolute owner of the assets of the Fund, and shall have ultimate authority over investments of the Fund, the selection of charities to receive distributions from the Fund, and the timing and amounts of the distributions. I (we) also acknowledge that FJC will distribute funds contributed, and income earned by these funds, generally to charitable organizations described in Sections 501(c)(3) and 509(a)(1), (2), or (3) of the Internal Revenue Code as it now exists or as it may be amended.

My (our) agreement with FJC to establish and maintain the Fund will consist of this Letter Agreement, Summary of Procedures and Rules, and the Donor Application that is attached to this letter. The agreement will be effective once it is accepted and signed by FJC and my (our) contribution has been received and accepted by FJC.

Very truly yours,

Donor Signature

Donor Signature

Print Name

Print Name

*To accept grant and investment recommendations from a Donor, FJC must have that Donor's signature and contact information on file.

Accepted by:

FJC - A Foundation of Philanthropic Funds

Signature Title Date



Account Number: _____

INDIVIDUAL/FAMILY DONOR APPLICATION

DONOR INFORMATION (Please be sure to include all the information for any Donor who will be making recommendations for the Fund.)

Donor

Donor

Name

Name

Home Address

Home Address

City/State Zip

City/State Zip

Daytime Telephone

Daytime Telephone

Fax

Fax

Email

Email

Relationship of Donors to each other: _____

Each Donor should have the full, equal, and Independent privilege to recommend Investment preferences and grants distributions and to designate additional and successor Recommenders.

IMPORTANT: For information about the privileges of Donors and Recommenders, including the ability of Donors to limit or expand the privileges of Recommenders, and about the final disposition of your Fund, please consult the Summary of Procedures and Rules for Donor Advised Funds.



INDIVIDUAL/FAMILY FJC FUND PROGRAM OPTIONS

Fund Name: _____ Account Number: _____

IMPORTANT: For information about the privileges of Donors and Recommenders, including the ability of Donors to limit or expand the privileges of Recommenders, and about the final disposition of your Fund, please consult the Summary of Procedures and Rules for Donor Advised Funds.

DESIGNATION OF ADDITIONAL RECOMMENDERS

Up to four persons (including the Donors) may serve as recommenders for the Fund at any one time, except that the Donor's spouse and children may all serve, regardless of their number. IMPORTANT: In order for FJC to accept grant and investment recommendations from a Recommender, we must have that Recommender's contact information and signature on file.

Name

Daytime Telephone

Home Address

Fax

City/State

Zip

Email

Relationship to Donor

Additional Recommender's Signature

Receive Fund Statements: ____Yes____No

Account Portal Access: ____Full Access____ReadOnly____No Access

DESIGNATION OF SUCCESSOR RECOMMENDERS

These individuals are authorized to make recommendations of investments of, and distributions from, the Fund after the death or disability of the Donors and the death, disability, termination, or resignation of all the Additional Recommenders.

Name

Daytime Telephone

Home Address

Fax

City/State

Zip

Email

This Recommender may replace any Donor or Recommender: Please Initial: _____ OR

This Recommender may replace the following Donor or Recommender: Print Name: _____



Account Number: _____

FINAL DISTRIBUTION OF FUNDS

At such time as there are no surviving Donors or Recommenders, I/we recommend that any amounts remaining in my/our Fund should be treated as follows:

_____ % of the remaining balance be placed in the General Fund of FJC to create a Memorial Fund in the name of:

_____ % of the remaining balance be maintained at FJC and the income from the Fund be contributed annually, in the percentages shown, to the following charities:

%	Charity Name and Address

_____ % of the remaining balance to be contributed, in the percentages shown, to the following charities:

%	Charity Name and Address

_____ I/we choose not to select a final designation at this time.

Please Initial: _____

Please Initial: _____

SIGNATURES

Donor Signature: _____

Date: _____

Donor Signature: _____

Date: _____



Account Number: _____

INITIAL CONTRIBUTION (\$1,800 minimum)

Cash Amount - Please contact FJC for wire instructions.

Check: \$ _____ Wire: \$ _____

Securities of Publicly Traded Companies

Company	Number of Shares

Other Securities - Please contact FJC to discuss contributions of restricted securities and securities of privately held companies.

Mutual Funds - Please contact FJC for transmittal instructions.

Other Assets - Please contact FJC to discuss contributions of other types of property.

INVESTMENT ALLOCATION RECOMMENDATION

You may recommend the allocation of your contribution among the following investment options. If no choices are indicated, the contribution will be invested in the Money Market Fund.

Investment Recommendations	Fund Manager	\$ or %
Agency Loan Fund	FJC ALF	
Fixed Income - Intermediate Duration	Bernstein Intermediate Duration	
Growth Fund	Janus Research Fund	
Money Market Fund	Various	
S & P 500 Index Fund	Vanguard 500 Index Fund	
Socially Responsive Fund	Vanguard FTSE Social Index Fund	
Value Equities - International	Bernstein International Equity	
Total Stock Market Index Fund	Vanguard Total Stock Market	
Total:		

AUTHORIZATION TO LIST NAME OF FUND IN FJC ANNUAL REPORT

I/we authorize FJC to list the name of this Fund in the FJC Annual Report.

Please Initial: _____

Please Initial: _____

HOW DID YOU LEARN ABOUT FJC?

Referred by: _____

Radio/Print Advertisement: _____

Other: _____

