Grant Recommendation Form

Name of Donor Advised Fund	
As the Advisor to the above-referenced fund, I recommend that (one grant per request form):	at the following grant be made from the fund
Charitable Organization Information	
Organization:	
Contact:	
Address:	
Phone/Email:	
Recommended Grant Amount	
Grant Amount \$	
Donar Acknowledgement	
Donor Acknowledgement	
☐ In the name of the Donor Advised Fund (this option will be use ☐ Anonymously	ed if no other selection is made)
Purpose of Grant	
□ Unrestricted □ Specific Program or Project/Other:	
Signature of Fund Advisor	
I understand that this recommendation is advisory only and that with Lakeshore Community Foundation, Inc., whose responsibility charitable purposes consistent with Internal Revenue Services Foundation, Inc.'s purpose, as well as the tax laws applicable recommendation above does not represent payment of a pleobehalf of the donors, advisors, family members, or related part more than incidental benefits, goods, or services were or will be with the fund.	lity it is to ensure that all grants are made fovice guidelines and Lakeshore Community le to donor-advised funds. I attest that the dge or other personal financial obligation or ties and businesses they control, and that no
Signature of Fund Advisor	Date
Print Name	
Please return this form to:	Lakeshore Community Foundation, Inc. 915 Memorial Drive Manitowoc, WI 54220 wiegert@LakeshoreCommunityFoundation.org

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LAKESHORE COMMUNITY Foundation