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## DONOR ADVISED GRANT SUGGESTION FORM

**FUND NAME:** \_\_\_\_\_

\_\_\_\_\_

I (We) suggest that the Cortland Community Foundation review and approve the following distribution(s) from the above named fund. I (We) understand that the Distribution Committee of the Foundation, who ensures that all distributions meet the regulations of the Internal Revenue Code and are in compliant with the policies and procedures of the Foundation, must review and approve the grant recommendations. I (We) attest that these recommendations do not represent the payment of any legally enforceable pledge or obligation, and that I (we) will not receive any goods, services or non-tax deductible membership benefits.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Name and Address of Recipient Organization:**

**Suggested Amount of Gift:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\$ \_\_\_\_\_

**Special Instructions:** \_\_\_\_\_

**FUND NAME:** \_\_\_\_\_

**Name and Address of Recipient Organization:**

**Suggested Amount of Gift:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\$ \_\_\_\_\_

**Special Instructions:** \_\_\_\_\_

**Name and Address of Recipient Organization:**

**Suggested Amount of Gift:**

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\$ \_\_\_\_\_

**Special Instructions:** \_\_\_\_\_

**Name and Address of Recipient Organization:**

**Suggested Amount of Gift:**

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\$ \_\_\_\_\_

**Special Instructions:** \_\_\_\_\_

**Name and Address of Recipient Organization:**

**Suggested Amount of Gift:**

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\_\_\_\_\_

\$ \_\_\_\_\_

**Special Instructions:** \_\_\_\_\_