



SAN JUAN ISLAND

Community Foundation

PLEASE MAIL TO:
Post Office Box 1352
Friday Harbor WA 98250
(360) 378-1001
www.sjicf.org

NOTICE OF CONTRIBUTION

DONOR INFORMATION

Name(s)
Mailing Address
City State Zip
Home Phone Business Phone Email(s)

RECIPIENT FUND

Healthy Community Fund
Scholarship Fund
Peace Island Medical Center
Foundation Operations
The Endowment
The Arts
Education
Basic Social Needs
Health & Wellness
Donor Advised Fund: Fund Name
The Environment
Community Infrastructure
Specific Project(s):
Name Project(s):
Area of Greatest Need

CONTRIBUTE

I/we hereby assign to the San Juan Island Community Foundation the following described property:
Cash in the amount of :
Publicly traded securities (specify number, ticker & cusip)

COMPLETE THE CONTRIBUTION

Thank you for your generous support and commitment to the San Juan Island Community Foundation. The Foundation is a 501(c)(3) organization. Contributions are tax deductible as allowed by law.
I agree to the terms and conditions set forth herein (see www.sjicf.org - "Manage Account" - Fund Terms & Conditions). I understand that any contribution once accepted by the San Juan Island Community Foundation, represents an irrevocable contribution to the San Juan Island Community Foundation and is not refundable to me.

Donor signature(s) Date

ACCEPTANCE BY THE FOUNDATION

Signature Date