

Name (Printed)

Grant Suggestion Form

Rev.6/2/2021

In order to make a grant suggestion from a donor advised fund, complete and return this form by mail to 1435 Crossways Blvd, Ste. 303, Chesapeake, VA 23320, email to grants@sevacf.org, or fax to (757) 397-7948.

Advisor Name: Name of Fund:			Date: Fund #
As an advisor of the above-named fund, I suggest that the following grants be awarded from it:			
Amount: \$		Date Needed by:	
Organization (Lega	l Name):		
Contact Name:		Phone:_	
501(c)(3):	□Yes □No	Federal ID #:	
Address:			
Purpose: Area of Interes		☐ Civic & Economic Developr☐ Health & Human Services	ment \square Education
The Foundation will take your suggestion and confirm that the charities suggested are recognized by the IRS as tax-exempt and that they meet our standards for responsible management. Qualified organizations, if approved, will receive a grant made in your fund's name, and you will receive an acknowledgement of the approval.			
I certify that the above-listed grant(s) will neither be used to satisfy a legally binding pledge, nor to provide any goods or services to any person or entity associated with the Fund. I understand that the above-listed grant(s) are suggestions and that the Southeast Virginia Community Foundation is not under any legal obligation to approve the grant(s).			

Signature