

**RECOMMENDATION FOR  
CHARITABLE DISTRIBUTIONS**

**TO:** Community Foundation of Southeastern Massachusetts

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

I (we) recommend that Community Foundation of Southeastern Massachusetts (CFSEMA) review and approve the following distribution(s) from the above fund. I understand that the final judgment rests in the hands of CFSEMA, whose charge it is to ensure that all distributions meet the regulations of the Internal Revenue code and are compatible with the policies and purposes of CFSEMA. I (we) certify 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 membership benefits.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Name & Address of Recipient Organization**

**Contact & Suggested Gift Amount**

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

Contact: \_\_\_\_\_  
\$ \_\_\_\_\_

Memo Line: \_\_\_\_\_

Check one:     Award grant as soon as possible     Award grant at CFSEMA annual distribution

**Name & Address of Recipient Organization**

**Contact & Suggested Gift Amount**

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

Contact: \_\_\_\_\_  
\$ \_\_\_\_\_

Memo Line: \_\_\_\_\_

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

Contact: \_\_\_\_\_

Memo Line: \_\_\_\_\_

Award grant as soon as possible     Award grant at CFSEMA annual distribution

CFSEMA Approval: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_