



BLUE MOUNTAIN  
COMMUNITY  
FOUNDATION

## Distribution Recommendation Form

**Gift Fund Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I (we) recommend the following distributions to the Board of Trustees. I (we) understand that the final judgment rests in the hands of the Board, whose charge it is to see that all grant distributions are within the purpose of Blue Mountain Community Foundation. I (we) acknowledge that the request recommendations do not represent the payment of any legally enforceable pledge nor does the undersigned expect any goods or services as a result of this charitable donation.

**Signature:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

### RECOMMENDED ORGANIZATIONS:

1. Organization Name: \_\_\_\_\_ Suggested Gift \$ \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Anonymous Grant:  yes or  no  
 Website/Other information:

Purpose/Special Instructions:

2. Organization Name: \_\_\_\_\_ Suggested Gift \$ \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Anonymous Grant:  yes or  no  
 Website/Other information:

Purpose/Special Instructions:

3. Organization Name: \_\_\_\_\_ Suggested Gift \$ \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Anonymous Grant:  yes or  no  
 Website/Other information:

Purpose/Special Instructions: