

HOW WILL YOU ASSURE JEWISH TOMORROWS?



What aspects of Jewish life do you cherish most—learning, community, worship, caring for those in need or social justice? Whatever you care about most, by leaving a legacy you ensure the things you value are sustained for future generations.

To create your Jewish Legacy, please contact:

Jeff Schragenheim, President

Nanuet Hebrew Center

411 South Little Tor Road

New City, NY 10956

(845) 708-9181

jeff@nanuethc.org



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Rockland County Jewish Legacy

Letter of Intent



*“As my ancestors planted for me, so do I plant for those who will come after me” – Talmud.
Accordingly, it is with deep satisfaction that I/We share that. . .*

- I/We have already made a provision in my/our estate plan
- I/We shall make a provision in my/our estate plan within the next _____ months (must be 12 or less)

To create a legacy by supporting the following Rockland County institutions (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Beth Am Temple | <input type="checkbox"/> Montebello Jewish Center |
| <input type="checkbox"/> Congregation Sons of Israel, Nyack | <input type="checkbox"/> Nanuet Hebrew Center |
| <input type="checkbox"/> Hillel of Rockland | <input type="checkbox"/> New City Jewish Center |
| <input type="checkbox"/> Holocaust Museum & Center for Tolerance and Education | <input type="checkbox"/> Orangetown Jewish Center |
| <input type="checkbox"/> JCC Rockland | <input type="checkbox"/> Rockland Jewish Family Service |
| <input type="checkbox"/> Jewish Federation and Foundation of Rockland County | <input type="checkbox"/> Temple Beth Sholom |
| | <input type="checkbox"/> The Reform Temple of Rockland |
| | <input type="checkbox"/> Other _____ |

With a legacy gift in the approximate amount of _____ (\$ or % value) established through (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> A gift in will | <input type="checkbox"/> Cash gift |
| <input type="checkbox"/> A gift in trust | <input type="checkbox"/> Real estate, business interest and/or stock assets |
| <input type="checkbox"/> Retirement account | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Life insurance policy | |
| <input type="checkbox"/> I/We prefer to keep the details of this commitment confidential | |

Permission:

- To encourage others to make commitments to the future, I/we permit my/our name to be listed with other donors as follows: _____
- I/We prefer to remain anonymous

Name(s): _____

Address: _____

City/State/Zip: _____

Phone: _____ Email: _____

This letter of intent is not a legal obligation and may be changed at my discretion at any time

Signed _____ Date _____

Signed _____ Date _____

Contacted by (name & organization): _____

Please return this Letter of Intent to the organization named above or to Barry Kanarek, Jewish Federation & Foundation of Rockland County, 450 West Nyack Road, West Nyack NY 10994. If you have questions, contact Barry at (845) 362-4200 ext 170 or bkanarek@jewishrockland.org .