

circle of life

Join our Circle of Life to assure that every Jew, regardless of financial means or religious affiliation, receives a dignified, traditional Jewish funeral and burial. Please use this form to share the details of your bequest intentions for The Hebrew Free Burial Association (HFBA). Your estate is not legally bound by submitting this statement, but remains revocable and can be modified at any time. The following information will be held in strictest confidence.

Address City Phone		
City		
Phone	State	
. HOLIC	Email	
☐ As evidence of our desire to provide a legacy of dignified wish to inform The Hebrew Free Burial Association tha		
As of this date, the approximate value of my/our gift is of your estate, please indicate the approximate presen	\$(I t value of that perce	f your gift is a percentage entage, if you will.)
I/we designate this gift to be used for: Unrestricted Support (to be determined by the HFB. Restricted Support, for the following purposes:	A Board of Directo	rs)
We welcome the opportunity to recognize your generous select HFBA publications, as a way to express our gratic contribute in this way.		
Yes, you may publicize my/our name(s).		
□ No, I/We prefer my/our intentions to remain anony	mous.	
Donor(s) Signature(s)	Da	te
Make a planned gift to HFBA for tax benefits, high rates Please send me more information about:		
☐ HFBA Forever Gift Annuity ☐ Forever Gift	Charitable Remain	nder Annuity Trust

akoplow@hebrewfreeburial.org or (212) 239-1662

www.hebrewfreeburial.org