IRA Distribution Request



Date:			
Plan Administrator Contac	t Name:		
Plan Administrator:			
Address:			
City:	State:	Zip:	
Re: Request for IRA Charit	able Distribution		
Dear Plan Administrator,			
Please accept this letter o		table distribution fron	n my Individual Retirement Account, a
Please issue a check payal	ole to Colorado Gives Foundatio	on (EIN 51-0157964) in t	he amount of \$.
Mail this check to:			
Colorado Gives Foundation	1		
Attn: IRA Dept.			
5855 Wadsworth Bypass, L	nit A		
Arvada, CO 80003			
	o Colorado Gives Foundation, pl ve this transfer qualify during th		onor, include my address of record, and copy
If you have any questions,	can be reached at		
Thank you for your prompt	assistance.		
Sincerely,			
Donor Signature			
Donor Printed Name			