

# Donor Advised Fund Grant Recommendation Form



Please complete this form & mail to our address below or email Adrienne Whisman, [awhisman@ghacf.org](mailto:awhisman@ghacf.org).

Fund Name: \_\_\_\_\_

Grant Amount: \_\_\_\_\_  
(\$250 minimum) *(We request that your fund not fall below a \$5,000 balance)*

Organization Name: \_\_\_\_\_

Organization Address: \_\_\_\_\_  
*Street Address*

\_\_\_\_\_  
*City State Zip Code*

Organization Phone: \_\_\_\_\_

Organization Email: \_\_\_\_\_

Anonymous: ☐ Yes ☐ No

Charitable Purpose: ☐ General Operating Support  
☐ Specific Purpose or Project: \_\_\_\_\_

Additional Comments: \_\_\_\_\_

This is a recommendation and not a direction. This recommended distribution does not represent the payment of any pledge or other financial obligation of the donor. The undersigned and related parties decline any personal benefit associated with this gift.

The Grand Haven Area Community Foundation will perform necessary due diligence of the charitable organization to ensure compliance with federal regulations.

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

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Contact Email*

\_\_\_\_\_  
*Contact Phone*

Please Note - Our office moved on November 15, 2023

Grand Haven Area Community Foundation • 6 Sherman Ave. • Grand Haven, MI 49417  
Phone: 616-842-6378 • Fax: 616-842-9518 • [www.ghacf.org](http://www.ghacf.org)