



Mackinac Island

 community foundationSM

**Grant Suggestion Form
 Donor Advised Fund**

Date _____

I (We) suggest grant distribution(s) from the (Fund Name):

to the following organization(s):

Organization (if organization is not local, please provide address)	Amount

Purpose (unless general operating)

Organization	Amount

Purpose (unless general operating)

I acknowledge that the above suggestion(s) do not represent the payment of any pledge or other financial obligation that has not had prior approval of the Foundation Board. Nor does the undersigned expect any personal benefit from this charitable distribution.

Signature	Phone number	Email

If you have questions, please contact Stephanie McGreevy, Executive Director, 906-847-3701 or email smcgreevy@micf.org.
 Please keep one copy for your own files and return original to: Mackinac Island Community Foundation
 PO Box 1933
 Mackinac Island, MI 49757