Intent to recommend

Vanguard Charitable

Donor Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

I intend to recommend the following grant from my Vanguard Charitable philanthropic account to:

_____
(Organization name)

☐ A $ _____ grant on _____ .
                                    (date)

☐ A $ _____ recurring grant to be issued _____ starting in _____ _____ and
                                                    (yearly, quarterly, monthly)   (month)   (year)
ending in _____ _____ .
            (month)   (year)

☐ A $ _____ grant upon my death.