Name of Plan Administrator

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip Code

Dear IRA Plan Administrator:

Please accept this letter as my request to make a direct charitable distribution from my

Individual Retirement Account (IRA), Account #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Please issue a check in the amount of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, payable to

Student/Partner Alliance and mail to:

Student/Partner Alliance

561 Springfield Ave.

Summit, NJ. 07901

Attn: Margaret Momber

Student/Partner Alliance is a 501 (C) (3) and the Federal Tax ID is: 52-184 0944.

In your transmittal to Student/Partner Alliance, please indicate my name and address as the donor of record for this transfer and please copy me on your transmittal.

If you have any questions, please feel free to contact me at\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Thank you very much for your assistance in this matter.

Sincerely yours,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IRA Account Owner – Sign and Print your name Date

Address