Gift of Israel

account disbursement request form



Gift of Israel participants, participant parent and/or guardian:

1. Provide the participant's name on the line below:

You can request disbursement of funds from the participant account by completing and submitting this form to your federation. The federation will contact Signature Bank to transfer funds from the participant account to the federation's master account from which they will write a check as directed below.

2.	Provide the participant's	s social security number:	
3.		unt number in the boxes below: Contaction of the contaction of the contact in the boxes below: Contact in the boxe	ct Signature Bank Client Services at
4.	Enter participant's acco	unt balance in the box below:	
5.	Enter the dollar amount \$	of the disbursement required by the par	rticipant:
6.	Enter the agency, business name, association, or person to whom the disbursement should be made (either to pay for the trip or close account):		
7.	Provide participant, participant parent and/or guardian signature on the line below:		
8.	Forward this document to the participant's federation or organization through which the Gift of Israel accounts is managed. The federation will use this form to complete the transaction with Signature Bank on your behalf. Note: the participant may not directly request distribution of funds from Signature Bank.		
Federa the fede at 646-	eration's master account	ransfer of the above funds from the par for purpose of disbursement, 1) by call rding this form with name and signature srael account.	ling Signature Bank Client Services
	tion Acct. Name:	Signature:	Date: