



## IRA Charitable Gift Instructions

***Request for your administrator to make a charitable distribution from your individual retirement account (IRA)***

Date: \_\_\_\_\_

Financial institution (name and contact information): \_\_\_\_\_  
\_\_\_\_\_

By this letter, I request that you make a direct charitable distribution to Beauty of Sight from my Individual Retirement Account No. \_\_\_\_\_.

Please issue a distribution in the amount of \$ \_\_\_\_\_, payable to Beauty of Sight, and include a note indicating that my gift should be designated to:

Capital Campaign  
Research

DISTRIBUTION BY WIRE TRANSFER		DISTRIBUTION BY CHECK
Beneficiary: Beauty of Sight Foundation Bank Name: Wells Fargo Bank N.A. Bank Address: 420 Montgomery San Francisco, CA 94104 Account #: 1082114495 ABA: 121000248		Mail to: Beauty of Sight 1951NW 7th Ave, Suite 160- PMB 358 Miami FL 33136

In your transmittal to Beauty of Sight, please indicate my name as the IRA owner of record in connection with the transfer. Please copy me on your transmittal.

For your reference, the Federal Tax ID number for Beauty of Sight is **81-3526426**.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Donor name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Please return this completed form to:  
Cheryl Lawko, Developer Beauty of Sight Foundation, 900 NW 17th Street, Suite 348, Miami, FL 33136  
clawko@beautyofsight.org | Phone: (305) 326-6359

CIRCULAR 230 NOTICE: Any statements contained herein are not intended or written to be used, and cannot be used, by the recipient or any other taxpayer, for avoiding any penalties that may be imposed by