The Jimmy Crabtree Cancer Fund

	Owner/Donor Name
To: IRA Administrator	 -
	Address
	City, State, ZIP
Dear Sir or Madam: Please accept this letter as my request to make Individual Retirement Account (IRA), Account # intended to be an IRA Charitable Rollover, as an Revenue Code.	This distribution is
Please issue a check in the amount of \$ Cancer Fund, Inc. and send the check to the fo	
The Jimmy Crabtree Cancer Fund, Inc. P.O. Box 770446 Winter Garden, FL 34777-0446	
The Jimmy Crabtree Cancer Fund's tax ID number charitable recipient for this transfer. It is my inter charitable Distribution that will qualify for exclusive tax year.	ention to have this transfer be a Qualified
Important: In your transmittal to The Jimmy Crabtree Cancaddress as the donor of record in connection wittansmittal.	
If you have any questions I can be reached at _ assistance in this matter.	Thank you for your
Sincerely,	

