

**Request to Administrator for a
Charitable Distribution from Individual Retirement Account**

Date

Donor Name

Address

City, State Zip

IRA Plan Administrator

Address

City, State Zip

RE: Request for Charitable Distribution from Individual Retirement Account

Dear Sir or Madam:

Please accept this letter as my request to make a direct charitable distribution from my Individual Retirement Account # _____ as provided by the Protecting Americans from Tax Hikes Act of 2015.

Please issue a check in the amount of \$_____ payable to the organization at the address below:

**Beth Israel Deaconess Medical Center
Office of Development
330 Brookline Avenue, (OV)
Boston MA 02215**

Beth Israel Deaconess Medical Center's tax identification number is 04-2103881.

In your transmittal to Beth Israel Deaconess Medical Center, please note my name and address as the donor of record in connection with this transfer. Please copy me on your transmittal.

Thank you for your assistance in this matter.

Sincerely,

(Donor Signature)