



JEWISH  
NATIONAL  
FUND  
USA

*Your Voice in Israel*

## Matching Gift Form

Name of company (if applicable): \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Street 1: \_\_\_\_\_

Street 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Amount of Gift: \_\_\_\_\_

Please credit this gift to the following JNF Trip Participant: \_\_\_\_\_

Please e-mail the completed forms, paperwork, and check (as applicable) to [afrechtman@jnf.org](mailto:afrechtman@jnf.org) or mail to the following address:

Jewish National Fund  
Administrative Center  
P.O. Box 971054  
Boca Raton, FL 33497  
ATTN: Ariel Frechtman

**Questions?** Please contact Ariel Frechtman at [afrechtman@jnf.org](mailto:afrechtman@jnf.org) or 404.236.8990 x852