



Community Fund Ohio  
 17900 Jefferson Park, Suite 102 • Middleburg Heights, OH 44130  
 Phone: 216.736.4540 • Fax: 216.867.9783  
 www.communityfundohio.org

**Primary Designated Advocate (Organization)  
 Acceptance of Appointment**

(Return completed form to address or fax number above)

On behalf of the organization identified below, I accept the appointment as Primary Designated Advocate for the sub-account of the Community Fund Management Foundation Pooled Trust identified below and will act in the best interest of the Beneficiary.

I understand that I will be responsible, on behalf of the organization, for submitting distribution requests and Beneficiary Resource Records and I will receive all communication from the Trustee, Trust Advisor, or other related parties, including statements and tax documents. I also understand that I must quickly notify Community Fund Ohio if I move or are no longer an employee of the organization, the organization is no longer able or willing to serve as Designated Advocate, or if the Beneficiary moves or passes away.

My acceptance is effective as of \_\_\_\_\_, 20\_\_\_\_\_ .

Date	Signature of Designated Advocate's Authorized Representative
	Printed Name of Designated Advocate's Authorized Representative
Organization's Name	
Address	
Phone Number(s)	
Email Address	
Beneficiary's Name	
Agreement Number	(consisting of 1-2 letters and 8 numbers)