



Please use this form to submit any changes to the financial advisor information to your American Heart Association Donor Advised Fund. If you need assistance, call 800-584-8946.

Return completed forms to:
American Heart Association
Donor Advised Fund Program
8910 Purdue Road, Suite 555
Indianapolis, IN 46268

Fax: **877-222-1829**

Email: **heart@reninc.com**

■ DONOR ADVISED FUND INFORMATION

Fund name	
Account #	

■ FINANCIAL ADVISOR INFORMATION:

Company name	
Advisor name	
Street address	
City/State/Zip	
Phone	
Fax	
Email address	



■ ACKNOWLEDGMENT

The undersigned Donor(s) (hereafter referred to in the first person singular) acknowledges that I have read the Foundation's program donor guide and understand that any recommendation is advisory only and the final decision is subject to the full and exclusive control and discretion of Renaissance Charitable Foundation Inc.

Signature		Date
Printed Name of Donor		
Signature		Date
Printed Name of Donor		

If married, both donors should sign.

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 or visit our website at:
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