

INVESTMENT RECOMMENDATION CHANGE FORM

Fund Name: _____

	nent strategy that bes	ed to offer donors the opportunity st fits their philanthropic plans. tion on a quarterly basis.
Please indicate your prefe	erred investment allo	cation below*:
Pool	Allocated percentage of Fund assets	Estimated range of annual investment expenses expressed as a percentage of asset value
Cash Pool	%	0.15% to 0.25%
Short-Term Pool	%	0.50% to 0.70%
Intermediate-Term Pool	%	0.40% to 0.60%
Environmental, Social, Governance Pool (LT)	%	0.60%
Long-Term Pool	%	0.60% to 0.80%
Opportunity Pool	%	0.60% to 0.80%
Total:	100%	
*Please note that changes to investment allocations are permitted once per quarter. Please provide us with your current email address. Changes will be processed and confirmed via email.		
Email Address:		
Signature		 Date
Please email the completed form to: Anoop Kaur, Director of Donor Services at akaur@eastbaycf.org		

UPDATED: October, 2021