

## **Matching Gifts Program Application**

SECTION ONE - To be co	mpleted by the do	onor and forwarde	ed to the recipien		h gift			
mployee Name				Office Location				
Business Phone E-mail Address								
ome Address		City						
State Zip Recipient Organization Name			Date of Hire (MM/DD/YYYY)					
			Program D	Program Designation				
Carlo Carlo	5 - 46'	flats of Giff						
ype of Gift C Check C Credi	t/Debit Card		Date of Gif					
Amount of Gift Amount to be Mai			atched					
					1			
onor Verification (Signatur	e Required)							
certify that I am making this		the conditions stat	ted in the program	guidelines, that this	gift is			
ntirely my personal contribu				-	_			
hat all information presente			-					
		at neither i, nor my	naminy, nor any rea	ated till u party, wi				
enefit in any way from this	girt.							
	2	13						
mployee Signature					Date			
SECTION TWO - To be co			ion and forwarde	d to the address b	elow			
IN Le	egal Name of Organizatio	n						
44			City		less.	7:-		
Address			City		State	Zip		
hone		Fax						
ritorie								
Contact Name			Website Address					
Contact Title			Contact E-mail Address					
Date Gift Received (MM/DD/YYYY) Amount of Gift (USD)				Tax Deductible Gift Amount (USD)				
	Name of the last o	71 72						
certify that the above contri	bution was received	and that no direct	, tangible benefit w	ill accrue to the do	nor, to			
ny member of the donor's fa								
ead and understand the guid								
-			omation provided	cins form is accur	acc, and			
hat I am an authorized office	r or the recipient of	gamzation.						
170 (8.4) 1.70					Dete			
gnature and Title of Authorized Off	icer				Date			

Send the completed application to Reader's Digest Foundation Matching Gift Program via email to: RDFoundation@rd.com.

Or send via mail to: 44 South Broadway, FL 7, White Plains, NY 10601-4417.

**DEADLINES:** Starting January 1, 2020, the Foundation will grant approved applications on a calendar quarterly basis (for the quarters ending **March 31, June 30, September 30 and December 31**). Completed applications must be received by the program administrator no later than the last day of the quarter to be included in the payout for that quarter.

Matching Gifts requests received by the program administrator more than 90 days after the date of the gift are ineligible.