WESTERN TILE & M A R B L E

Matching Gifts Program Request Form

SECTION A—DONOR		
Please complete this section and send it, with your contribution, to the recipient organization. The recipient organization will complete Section B		
Name	Employee ID # (found on your pay stub)	
Address	City/State/Zip	
Phone	Email	
Select the type of gift(s) for which you are requesting Matching Gifts and complete the information in the corresponding box(es)		
VOLUNTEER GIFTS (complete this section ONLY if you are requesting Matching Gifts for volunteer hours worked)		
Organization Name	Number of Hours Worked (minimum of 10)	
City/State	Amount of Matched Request (\$15/hour) \$	
Dates Volunteer Hours Were Performed		
MONETARY GIFTS (complete this section ONLY if you are requesting Matching Gifts for monetary donation)		
Organization Name	Date of Gift	
City/State	Amount of Gift (minimum \$25)\$	
Type of Gift (check one) □Cash □Check □Credit Card	Amount of Matched Request \$	
Certification Statement I hereby certify that the information I have provided is complete and or provisions of the program set forth on this form and that my gift is not only the tax-deductible portion of my donation is eligible for matching	to be used for international or sectarian purposes. I understand that	
Donor Signature	Date	
SECTION B—RECIPIENT ORGANIZATION		
Please complete the following info and send to Western Tile & Marble Matching Gifts Program, 7140 180th Ave NE, Redmond, WA 98052		
Federal Employer ID #	Organization Name	
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SECTION B—	RECIPIENT ORGANIZATION
Please complete the following info and send to Western	Tile & Marble Matching Gifts Program, 7140 180th Ave NE, Redmond, WA 98052
Federal Employer ID #	Organization Name
Mailing Address	City/State/Zip
Phone	Fax
Email	Website
Gift Amount/Hours Worked	Tax Deductible Amount
Certification Statement I hereby certify that 1) the receipt of the gift described her the Western Tile & Marble Matching Gifts Program guide	ein, 2) the eligibility of this organization, 3) and the use of these funds conform with lines
Name of Organization Representative	Title
Signature	Date
	nodify or discontinue this program. The interpretation, application and etermined solely by Western Tile & Marble, and its decisions shall be final