



PROCEDURE FOR MATCHING GIFTS IN THE KOCH FOUNDATION MATCHING GIFT PROGRAM

- The eligible donor completes Section A of the Matching Gift Program form and sends the gift to the designated recipient institution.
- The institution reviews Section A, completes Section B and sends to jslade@kochllc.com.
- Koch Foundation, Inc. will then review the completed form and, if all requirements have been met, will match the gift during the quarter in which it was received.
- Additional forms may be obtained from Human Resources. If you have any questions, you may call Koch Foundation, Inc. at 812-465-9800. The Matching Gift Coordinator will help you.

MATCHING GIFT PROGRAM SECTION A

To be completed by **DONOR**
Please print or type

You can match up to \$ of my personal gift of \$ to:

(Name of Hospital, Educational Institution, Museum or Zoo)

which is authorized to report this gift to Koch Foundation, Inc. to apply for a matching gift under its Matching Gift Program.

(Donor's Name – Last, First, Middle Initial)

(Home Address – Street, City, State, Zip Code)

(Company)

(Company Location)

Employee Retiree

(Date of Employment)

(Signature)

(Date)

MATCHING GIFT PROGRAM SECTION B

To be completed by an appropriate **OFFICER** of the institution
Please print or type

I certify the receipt of the gift of \$ to:

(Name of Donor)

as described in Section A, to the eligibility of this institution as described in the program and that the gift will be used to support the primary objectives of the institution.

(Print or Type Full Name of Certifying Officer)

(Title)

(Name of Institution)

(Full Address of Institution)

(Authorized Signature)

(Date)