

FM Global Foundation Matching Gift Form

Address: FM Global Foundation Matching Gifts Program, 270 Central Avenue, Johnston, R.I. 02919

Telephone: 401-415-1200

DONOR FILLS IN THIS SECTION				
<p>PLEASE TYPE OR PRINT IN BLUE INK</p> <p>1. Fill in this section.</p> <p>2. Assure form is completed and signed.</p> <p>3. Mail original form with your gift to the organization.</p> <p>The donor's signature authorizes the recipient organization to report this gift to the FM Global Foundation to apply for a Matching Gift.</p> <p>Active Employees: All donations matched will be listed in Workday (Benefits) matching gift donations.</p> <p>Retiree/Director: Donation statements will be mailed once a year in January for the prior year.</p>	* Name of Donor:		Date:	
	<input checked="" type="checkbox"/> Active Employee	<input type="checkbox"/> Retiree/Director	<input type="checkbox"/> Group (Attach list)	
	* Employee ID Number:			<p>CHECKLIST</p> <ul style="list-style-type: none"> • Form is signed • Gift is U.S. \$25 or more • Yearly max U.S. \$8,000 • Date entered • Org. name entered • Clearly printed <p><input type="checkbox"/> Please check box if you have donated to this organization before.</p> <p>Once received donations take 30 to 60 days to be processed.</p>
	Mailing Address:			
	City:	State:	Zip Code:	
	Telephone:			
	E mail Address:			
	* Name of Organization or School (do not abbreviate)			
	Amount of Gift (minimum U.S. \$25)			
	Shares of	# Shares	Amount	
See reverse side for details on the program. To recognize original signature please sign in blue ink.				
**Signature	X		Date:	

I certify that this gift is a voluntary personal charitable contribution made with my own resources. This gift does not, in whole or in part, represent the gifts or loans of any other person or organization. I confirm that this gift is not made in return for or expectation of any monetary or material benefit for me, or for any person or organization named by me. In addition, I have read the Matching Gift Program materials and certify that I am in compliance with same. For group gifts only: I certify further that the attached list is a true and accurate representation of the source of the funds.

RECIPIENT ORGANIZATION FILLS IN THIS SECTION				
<p>1. Verify Donor section.</p> <p>2. Complete this section.</p> <p>3. Mail original form to FM Global Foundation 270 Central Avenue Johnston, R.I. 02919</p> <p><input type="checkbox"/> Check if the organization is an educational institution described in section 170(b)(1)(A)(ii) of the Internal Revenue Code.</p>	* Organization or School Name:		<p>First request? If your organization has not previously participated in the FM Global Foundation matching gifts program, please include your 501(c)(3) federal tax exempt letter from the IRS.</p> <p>* Fields not completed will cause a delay in processing.</p>	
	* Mailing address:			
	City:	State:		Zip Code:
	Telephone:			
	Authorized Name (print):			
	Title:			
	Email:			
	Amount of Donor's Gift	U.S. \$		
* Canadian Reg # _____ RR # _____				
**Signature	X		Date:	

I confirm the above gift was received and this organization is tax exempt under section 501(c)(3) of the U.S. Internal Revenue Code. I further confirm that no direct, tangible benefit will accrue to the donor, to any member of their family, nor to any related third party as a result of this gift and it will be used to support the charitable objectives of the organization. **** Original signatures required**