

KARL STORZ ENDOSCOPY-AMERICA, INC.

Request for Corporate Match of Charitable Donations

Please submit completed form to Human Resources Department

Employee Name _____ Date _____

Charitable Organization (Name & Address):

Amount of Employee Contribution _____

Type of Receipt Attached: Canceled Check _____ / Letter from Charity

Other (explain) _____

KSEA policy states:

The Company encourages support of charitable organizations. The Company believes that all donations to charitable organizations, no matter the amount, contribute to the enhancement of our community.

The Company generally will match employee contributions up to \$300 per year to broadly accepted social welfare or philanthropic organizations exempt from tax under Internal Revenue Code Section 501(c)(3). This policy excludes political organizations. To request a Company Matching Contribution, please submit a request form to the Human Resources Department. These forms are also available in Human Resources. **Your request must include your canceled check, credit card receipt, or a receipt on charity stationery.** All requests are subject to approval to assure compliance with tax laws and consistency with Company image and policies.

I request that KARL STORZ match my donation subject to the terms of the company policy.

Employee signature

Date

Human Resources Department Use:

Matching Contribution Approved _____ / Denied _____ Amount \$ _____

Approved by _____ Date ____ / ____ / ____ .

Accounting Department Use: 660510/5010.10126

Approved by _____ Date ____ / ____ / ____ .