

## Employee Match Form

Employee Name : \_\_\_\_\_ Date: \_\_\_\_\_

### Part A: To be filled out by employee

Name of Organization: _____	
Address: _____ _____ _____	
Contribution Amount: \$ _____	Volunteer Hours: _____
Reason for Contribution : _____ _____ _____	

### Part B: To be filled out by an official of the Non-Profit Organization

Name of Certifying Officer: _____
Telephone: _____
501(c)(3) Tax ID Number: _____

I certify receipt of \$ _____ or _____ hours completed by donor named _____.	
_____ Signature of Certifying Officer	_____ Date

Please return completed form along with a copy of your 501(c)(3) letter to:

**Steve Jeffrey**  
**Vice-President of Corporate Services**  
**Structural Integrity Associate, Inc.**  
**5215 Hellyer Avenue, Suite 210**  
**San Jose, CA 95138-1025**