



# Matching Gifts to Higher Education Program

## Application Form (U.S. and Canada)

### Instructions

1. Donor should complete Section I and forward the original Application Form to Recipient Organization along with gift.
2. Recipient Organization should complete Section II and forward the original Application Form to the Corporate Communications Department at Sysco Corporation (**Please note: W9 Form is required in order to receive payment**).

### Section I - Notification of Gift (To be completed by Sysco Donor - Please print or type)

\_\_\_\_\_  
Name of Recipient Organization

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

Enclosed is my personal gift\* of \$ \_\_\_\_\_ (OR \_\_\_\_\_ shares of  
(\*minimum of \$50 matched) Cash

\_\_\_\_\_ stock having a closing price of \$ \_\_\_\_\_ as of  
Name of Company

\_\_\_\_\_) Date of Gift

then forward the original copy of this application to the Sysco Corporate Communications Department for consideration of a matching gift contribution.

Name of Donor  Employee  Non-Employee Director  Distinguished Tenure Director

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Daytime Phone Number E-mail Address Social Security Number

\_\_\_\_\_  
Signature Company/Location Actual Gift Date

### Section II - Acknowledgement of Gift (To be completed by Recipient Organization - Please print or type) **W-9 Form is required**

This will confirm that \_\_\_\_\_ received a tax deductible  
Name of Recipient Organization  
gift of \$ \_\_\_\_\_ from \_\_\_\_\_.  
Amount Name of Donor

\_\_\_\_\_  
Name & Title of Representative

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone Number E-mail Address

\_\_\_\_\_  
Federal Tax Identification Number

\_\_\_\_\_  
Signature Date