

RECIPIENT

Please print or type legibly. Any Matching Gift forms received from you by the company after February 28 for gifts made during the previous year WILL NOT qualify to be matched. All inquiries regarding the program should be made in writing.

EXACT NAME OF ORGANIZATION

ADDRESS

CITY

STATE

ZIP

CONTACT NAME

CONTACT PHONE NUMBER

DATE GIFT RECEIVED

AMOUNT RECEIVED

I certify that the above gift has been received, that it represents the gift of one person only, and that it will be used to support the primary objectives of this organization, which is classified a tax-exempt, 501(c)(3) organization according to the United States Internal Revenue Code. I enclose a copy of the current letter from the IRS regarding the tax-deductibility of the contribution for income tax purposes (if you do not have one on file with this company) and certify that such letter has not been revoked or modified as of the date hereof. I further certify that this gift is not in payment of tuition, books, fees, alumni dues, memberships, subscriptions, tickets to events or similar items and that any matching gift will not be used for any such purpose.

AUTHORIZED SIGNATURE

TITLE

Recipient Please Return to:
P.O. Box 7898
Princeton, NJ 08543-7898
855-656-7383

Coca-Cola Refreshments



**Matching
Gifts
Program**

Coca-Cola Refreshments recognizes the importance of individual support of nonprofit organizations. Through the Matching Gifts Program for Education, the Arts and the Environment, we will continue the legacy of assisting many nonprofit institutions by combining the generosity of corporate resources with employee giving.

The Matching Gifts Program matches gifts up to \$5,000 per participant in each calendar year on a one-for-one basis. This program is designed to encourage your participation and promote your individual support of those qualifying institutions most important to you.

The Matching Gifts Program allows you to assist the company in determining how to spend a portion of its philanthropic resources. This form describes the program and the procedures for obtaining matching funds for your donations. This form is for use in making the contribution. Additional forms are available and can be obtained by contacting the Matching Gifts Program ccr@easymatch.com

TYPE OF MATCH AND ELIGIBLE GIFTS

- Gifts will be matched on a one-for-one basis.
- The amount of each gift after deduction for benefit(s) received, shall equal at least \$25 in order to be eligible to be matched.
- A maximum of \$5,000 of gifts per participant and/or spouse per calendar year will be matched.
- Gifts of cash or marketable securities must be made from participant's personal assets.
- Gifts are matched on an ongoing basis throughout the year. However, no matching payment will be made unless a properly completed Matching Gifts form from the recipient organization is received by the Matching Gifts Program by February 28th of the calendar year following the year in which the gift is made.

WHO IS ELIGIBLE TO PARTICIPATE?

- Permanent full-time U.S. employees of Legacy Coca-Cola Enterprises and its subsidiaries who have completed six months of service, and their spouses
- Permanent full-time U.S. employees of Coca-Cola Refreshments who have completed six months of service, and their spouses.
- Retired members of Coca-Cola Enterprises Board of Directors and their spouses
- Retirees and their spouses
- Surviving spouses do not qualify

NOTE: SPOUSES OF ELIGIBLE EMPLOYEES, DIRECTORS OR RETIREES MUST FILE JOINTLY.

WHAT ARE THE QUALIFICATIONS FOR ELIGIBLE RECIPIENTS?

- Fully accredited, 4-year, degree-granting, public or private colleges and universities
- Graduate and professional schools including seminaries and theological schools
- Educational funds, alumni funds, foundations and associations
- Secondary and elementary private schools which are accredited and managed under the direction of an independent board of trustees
- Arts, cultural, and environmental organizations, open to public participation and recognized as tax-exempt by the Internal Revenue Service under section 501(c)(3), such as: museums, art galleries, neighborhood art centers, dance companies, opera companies, symphony orchestras, musical performing groups, community theater companies, public broadcasting systems, public or research libraries, botanical or zoological societies, historical societies, historical preservation/restoration societies, planetariums, water and conservation organizations, and litter prevention programs.

NOTE: ALL RECIPIENTS MUST BE LOCATED IN THE UNITED STATES

WHAT ARE SOME EXAMPLES OF INELIGIBLE GIFTS?

- Gifts that return benefits to the donor such as memberships, subscriptions or tickets to events
- Payments made in lieu of tuition, books or other student fees
- Gifts in the form of a pledge
- Gifts to organizations operating outside the United States
- Gifts to parochial schools or other schools of religious denomination which are not managed under the direction of an independent board of trustees
- Gifts to athletic scholarships, political groups, war veterans groups or federated charity funds



EMPLOYEE

Employee Personnel # _____

1. Before making your contribution, complete section one of this form. Please include all requested information. Incomplete forms will be returned to the participant. Please type or print legibly.
2. Spouses of eligible participants must include information on the employee, retiree or director.
3. All inquiries should be made in writing and mailed to: P.O. Box 7898, Princeton, NJ 08542-1898. Or email to: ccr@easymatch.com, 855-656-7383
4. Coca-Cola Refreshments reserves the right to suspend, terminate or amend this program at any time without prior notice

EMPLOYEE FULL NAME _____

SPOUSE NAME _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP _____

DAYTIME PHONE _____

EMPLOYMENT DATE _____ WORK LOCATION _____

AMOUNT OF GIFT _____ DATE OF GIFT _____

RECIPIENT ORGANIZATION _____

RECIPIENT ADDRESS _____

CITY _____ STATE _____ ZIP _____

ARTS or EDUCATION or ENVIRONMENT

CASH or STOCK

PLEASE CHECK IF: DIRECTOR RETIREE

SPOUSE EMPLOYEE

AMOUNT OF MATCH IF DIFFERENT _____

EMPLOYEE SIGNATURE _____

MAIL THIS FORM WITH YOUR DONATION TO THE RECIPIENT ORGANIZATION.