

CABOT OIL & GAS CORPORATION

MATCHING CONTRIBUTION PROGRAM

PART I: TO BE COMPLETED BY THE EMPLOYEE	
Enclosed is my gift of \$	
This gift is unrestricted or is to be used for	
Name of Employee	Name of Institution
Street Address	Street Address
City, State, Zip Code	City, State, Zip Code
Date of Gift Other Description:	Telephone Number
	report this gift to Cabot Oil & Gas Corporation. I understand ration will match is from \$250/minimum to \$5,000/maximum
Employee Signature	Date
After completing PART I, mail the form wi	th your gift to the institution or organization.
FOR COMPANY USE ONLY:	
A matching contribution of \$	was sent to the above named institution on
<u> </u>	
	Treasurer



CABOT OIL & GAS CORPORATION MATCHING CONTRIBUTION PROGRAM

PART II: TO BE COMPLETED BY THE FINANCIAL OFFICER OF THE INSTITUTION

higher education or an elementary, secondary or	iness or technical school offering two or more years of high school. An educational institution in this category professional organization to qualify for a matching
	 Agencies dealing with health, eradication of disease, employment and programs dealing with youth, child
Organizations Involved in Arts and Culture – No performing arts companies, libraries, public televis	Auseums, arts, theatre, orchestras, historical societies, sion and national public radio member stations.
_	Local, regional or national agencies concerned with the cluding animal welfare, water usage programs, pollution
I hereby certify receipt of the following gift also describ	ed in PART I of this form.
\$ in cash	
& Gas Corporation is not in lieu of a specific individual's tu donor with other tangible benefits from this institution and t	this form and any matching contribution received from Cabot Oiition or dues, a gift to an athletic fund or does not provide the hat the matching contribution will be used exclusively to support or environmental objectives of this facility. I also certify that the his contribution qualifies for Federal Income Tax Deduction.
Authorized Signature	Name of Institution
Printed Name and Title	Street Address
Federal Income Tax Identification Number	City, State, Zip Code

This form, along with the completed certification, should be returned to:

Treasurer Cabot Oil & Gas Corporation PO BOX 4544 Houston, TX 77210-4544