

**Cephalon Matching Gift Request Form**

- 1. Complete the top portion of this form.
- 2. Send the form with your contribution to your charity of choice.
- 3. The charity completes the bottom portion & returns the form to Cephalon.
- 4. Cephalon processes the dollar-for-dollar match on your behalf.

EMPLOYEE NAME

\_\_\_\_\_

DEPARTMENT

\_\_\_\_\_

\_\_\_\_\_ I request that Cephalon match my gift of \$\_\_\_\_\_ to

\_\_\_\_\_.  
\_\_\_\_\_ I understand that the maximum amount Cephalon will match is \$250 even if my own gift is larger than that amount.

\_\_\_\_\_ I understand that Cephalon has the right to decline the match if the organization does not meet my companys specific giving criteria as outlined in the Matching Gift Initiative Policy.  
INITIAL ONE CHOICE: Cephalon \_\_\_\_\_ may \_\_\_\_\_ may not use my name in any list of contributions produced to promote the Matching Gift Initiative.

ORGANIZATION COMPLETES THIS SECTION AND SENDS THE FORM TO:

CEPHALON MATCHING GIFTS

41 Moores Road

PO Box 4011

Frazer, Pennsylvania 19355

This form may be faxed to CEPHALON MATCHING GIFTS at 610-344-0981.

CHARITABLE ORGANIZATION

\_\_\_\_\_

MAILING ADDRESS

CITY \_\_\_\_\_ STATE \_\_\_\_\_

ZIP \_\_\_\_\_

PHONE (\_\_\_\_) \_\_\_\_\_ E-MAIL \_\_\_\_\_

\_\_\_\_\_ We confirm receipt of a contribution from the Cephalon employee named above.

\_\_\_\_\_ We confirm that the total amount of this gift is \$\_\_\_\_\_ and that Cephalon will match dollar-for dollar up to \$250.

\_\_\_\_\_ We confirm our organizations IRS status as a 501(c)(3) charity to which tax-deductible contributions may be made.

\_\_\_\_\_ Enclosed is a copy of our organizations IRS Form W-9 (Must be included by organizations who have not previously submitted a request to Cephalon.) <http://www.irs.gov/pub/irs-pdf/fw9.pdf>

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SIGNATURE PRINT NAME & TITLE DATE

