PART A TO BE COMPLETED BY CONTRIBUTOR PART B TO BE COMPLETED BY RECIPIENT ORGANIZATION

<u>ITOCHU AUTOMOBILE AMERICA INC. (IAAI)</u> MATCHING-GIFTAPPLICATION-FORM

Contributor's name			
Contributor's name _	LAST	FIRST	MIDDLE INITIAL
Home address			
Name of IAAI bran	ıch or division for	which you work	
Address			
Name of recipient o	organization		
Contribution		[of which only \$	is to be matched, if different]
Form of gift (check payment	k one)	check/credit card	securities Date of
If securities, name	and type of issue,	number of shares	
directly or		is is entirely my personal contribu	tion, and does not represent a paymen
Signature of contri	butor		
Part B: to be complete	ed by recipient organ	nization and then mailed to Itochu A	Automobile America Inc.
Legal name of recip	pient organization		
Street address			
City	State	Zip code	Telephone ()
Date of gift		Amount of gift	
	lirectly or indirectly f	ed above was received, I further cer for: services, tuition, religious purpo	
Signature of officer	r of institution		Date
Print name and titl	'e		
Tax ID No.:			
	bmit the following inform	action Organization votum forms to	: Human Resources- Matching Gift Program

Organization return form to: Human Resources- Matching Gift Program
ITOCHU AUTOMOBILE AMERICA INC.
33533 W. 12 Mile Road, Suite 300
Farmington Hills, MI 48331

last two years:

unless submitted to the Matching Gift Program within