

Palomar Ventures Matching Gift Form

Employee Name: _____

Name of Charity: _____

Address: _____

City/State/Zip: _____

Phone number: _____

Gift amount: _____
(from employee)

NOTE: Please attach a copy of the check or credit card receipt

Employee signature: _____ Date: _____

Instructions:

Please complete and submit this form with copies of proof of donation to Scott Walters. Palomar will review, contact the charity and confirm that your donation is received. Once confirmed, Palomar will mail the matching gift within 30 days.

Thank you for giving back to the community.