



EMPLOYEE MATCHING GIFT REQUEST FORM

GENERAL GUIDELINES

- RMS matches employee contributions 1:1.
- Employees must make a minimum contribution of \$25 to a single eligible organization to qualify.
- Annual maximum amount available for matching of charitable gifts is \$500/per employee per fiscal year; \$50,000 in total for RMS. Once the \$50,000 cap is reached, all matching under this program will stop.
- Matching funds are distributed to eligible organizations quarterly, after employee contribution is made.
- Requirements below regarding organization eligibility must be met in order for RMS to make a matching contribution.
- All RMS matches are entirely at RMS discretion, and RMS may elect to not match employee contributions to any organization for any reason.

INSTRUCTIONS

- Please complete this form – one for each gift. Incomplete forms may not be processed and will be returned.
- Attach a receipt that verifies the gift you made.
- If you are donating to an organization that is not nationally recognized, please attach verification of the organization’s non-profit tax exempt status (U.S. IRS code 501(c)/509(a)).
 - This can be in the form of a written statement from the organization, a printed statement on the receipt, or a print-out of the organization’s website stating its non-profit tax exempt status.
 - RMS may waive the 501(c) statement if the organization is nationally recognized.
- Send this form, your receipt, and the 501(c) statement (if applicable) within 60 days of the gift to:
 - US Matching Gift/ Attention: Yuritzi Carbajal/RMS Newark
 - EU Matching Gift/Attention: Yuritzi Carbajal/RMS Newark
 - Asia Matching Gift/Attention: Yuritzi Carbajal/RMS Newark

<u>Employee Information</u>		
Employee Name: _____		
RMS Office Location/Department: _____		
Employee Email/Work Phone: _____		
\$ Gift: _____ (Min. \$25)	Date: _____ (Date of Gift)	\$ Match: _____ (Min/Max \$25/\$500)

<u>Recipient Information - Please complete each item.</u>
Organization Name:
Organization Address:
Organization Phone/Email:
Organization Website (if applicable):

<u>Additional Recipient Information – Required for organizations outside United States (include IBAN or Account Number and SWIFT CODE).</u>
Bank Name:
IBAN:
Account Number:
SWIFT CODE:

Check One: 501(c) Letter Enclosed 501(c) Letter Previously Sent
 Other Verification Enclosed 501(c) Letter waived by RMS

I certify that the above information is true and correct. I also certify that neither I nor my family will derive any direct or indirect financial or material benefit from this contribution.

Employee Signature: _____ Today's Date: _____

RMS USE ONLY	
Employee match to date: \$ _____	USA Patriot Act Vetted: _____ (RMS Administrator Initials)