



EMPLOYEE MATCHING APPLICATION

After completing Section A, send the form and the donation check to the nonprofit.

STEP 1: SECTION A TO BE COMPLETED BY ZURICH EMPLOYEE

SECTION A

Individual Donation* Min \$20, max \$500 per application.

Team/Group Donation*

For group donations such as coworkers sponsoring an employee for a run/walk, attach a list of Zurich employee donors and their respective donations. Min \$20, max \$500 per employee.

*Zurich will match current U.S. Zurich employee contributions to nonprofits that meet Community Investment guidelines.

employee name

Zurich email address

home address (street and number)

city, state, zip code

office location

amount (monetary only):

exact date of gift:

name of nonprofit

address (street and number)

city, state, zip code

I certify that the above donation is solely for the use of the charity named above and that neither I nor any member of my family will directly benefit in any way from it. I further certify that the amount given is entirely my own, or that of a sponsoring group of Zurich employees listed on the attachment, and that it was not obtained from another non-Zurich employee(s) in part or in whole. I also certify that I am an active Zurich employee at the time of this donation, and authorize Zurich to provide the above charity with my personal information for donation purposes.

STEP 2: SECTION B TO BE COMPLETED BY AN AUTHORIZED REPRESENTATIVE OF THE RECIPIENT NONPROFIT.

Send completed form to Zurich within 3 weeks of receipt from donor.

SECTION B

Check the focus area that applies to your organization's mission:

- Health and welfare of children in need
- Community Resilience
- Health

As an authorized representative of this institution, I certify that:

- a gift of \$ _____
- was contributed by _____
- and was received on _____

Our institution is qualified under Section 501(c)(3) of the Internal Revenue Code. No direct, tangible benefit will accrue to the donor nor any member of his/her family as a result of this donation. A donation to this organization is a "charitable contribution" as defined by Section 170(c) of the Internal Revenue Code.

Make matching gift payable to:

name of nonprofit

address

city, state, zip code

telephone

email

signature of authorized representative and date

printed name and title

SECTION B (Continued)

PLEASE READ THIS SECTION BEFORE SUBMITTING

- Complete the form in its entirety and submit with:
 - completed W9 form
 - copy of 501(c)(3) determination letter
- Incomplete applications will **not** be considered.
- Include all original attachments supplied by the employee in the return documentation.
- Community Investment will review the completed application upon receipt from the nonprofit.
- All employee matching forms and documents must be received by the **first Friday of December** of the current fiscal year to be reviewed and processed in the same year.
- We request that tax receipt be sent by mail or email to the address listed below.

Effective October 1, 2016, please send the completed form and documents by mail or email to:

Zurich Employee Matching Program
Attn: Community Investment & Employee Engagement
Zurich North America
1299 Zurich Way
Schaumburg, IL 60196-1056
USZ.Employeeshare@zurichna.com

If approved, a letter will be returned to the nonprofit organization with Zurich's donation check and matching amount. If denied, the employee will be contacted.

STEP 3: FOR INTERNAL PURPOSES ONLY

SECTION C

Date received from nonprofit: _____

Matching donation amount: \$ _____

Vendor Number: _____

Document Number: _____