

# ALCAN EDUCATIONAL MATCHING GIFT PROGRAM

The Program provides direct support to educational institutions which are of personal interest to employees and retirees. Gifts made by employees and retirees to eligible institutions and independent schools are matched by the Company on a dollar for dollar basis.



## 1

### **Eligible Participants**

This Program is available to full time employees of Alcan Inc., its subsidiaries, to Directors of the Company and to our retirees.

## 2

### **Eligible Institutions**

To be eligible, institutions must be accredited by the appropriate government agency and able to provide charitable donation receipts acceptable to Revenue Canada. Canadian institutions should be listed with the Canadian Association of Independent Schools or the Association of Universities and Colleges of Canada – foreign institutions by their respective national associations.

## 3

### **General Provisions**

Alcan will match a participant's donation to one or more eligible institutions up to a total of CAN\$2,500 annually. Each gift must be at least \$25 (or an equivalent amount) and must be paid, not just pledged. Bequests, payment of dues, fees, subscriptions or donations made under an insurance policy are not eligible. Alcan gifts are unrestricted – not designated for a special purpose. The Company reserves the right to change or terminate the Program as conditions may warrant.

# INSTRUCTIONS

## Employees/Retirees:

Complete Section A of the attached form and forward it together with Section B and your donation to the educational institution of your choice.

## Schools/Universities:

Complete Section B and return the entire form, prior to **mid January** of the year following the date of the employee's gift, to:

Community Investment Program  
Alcan Inc.  
1188 Sherbrooke West  
Montreal, Quebec  
H3A 3G2

Matching gifts will be distributed on or before March 31 for gifts made during the preceding calendar year.



## SECTION A (to be completed by employee/retiree, please print or type)

Employee       Retiree

Date of gift \_\_\_\_\_

dollars     Can.     U.S.     EUR     Other:

Attached is the amount of my personal gift \_\_\_\_\_

For (special purpose, if any) \_\_\_\_\_

Name of Educational Institution, related Alumni Fund, Foundation \_\_\_\_\_

Address \_\_\_\_\_

Postal Code \_\_\_\_\_

Name of donor \_\_\_\_\_

Home address \_\_\_\_\_

Postal Code \_\_\_\_\_

Company, division and location \_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_

## SECTION B

(to be completed by a designated official of the Educational Institution or Organization)

dollars     Can.     U.S.     EUR     Other:

I hereby confirm the amount of the gift \_\_\_\_\_

Was received by (name of institution\*) \_\_\_\_\_

on (date) \_\_\_\_\_ and that this organization \_\_\_\_\_

has a currently valid ruling, from Revenue Canada, that contributions made to it are deductible for Canadian income tax purposes and that educational institution satisfies, in all respects, the eligibility requirements of the Alcan Educational Matching Gift Program.

Signature of official \_\_\_\_\_

Name and title \_\_\_\_\_

\*This should be the fund or institution to which Alcan's cheque will be made payable.