

**Creative Genius Matching Gifts Program
Attn: Accounts Payable (Corp)
Creative Genius Corporation
P.O. Box 1392
Reston VA 20191**

TO BE COMPLETED BY: Creative Genius Employee

Name: _____ Date of hire: _____

Address: _____ State: _____ Zip: _____

Company: _____

Name of institution receiving gift: _____

Total amount of gift: _____ Cash/Check Securities

If securities, name and number of shares: _____

I certify that the amount of this gift is entirely my own and is entirely tax deductible under the U.S. Internal Revenue Code.

Employee signature: _____ Date: _____

TO BE COMPLETED BY THE RECIPIENT INSTITUTION

Name of institution: _____

Officer authorized to sign form: _____

Title: _____

Institution telephone number: _____

Amount received: _____ Date received: _____

I confirm that the above gift was received from the named contributor and that the entire amount of the gift is tax deductible in accordance with the U.C. Internal Revenue Code.

Authorized Signature: _____