



# Relay For Life of Pottstown

## Matching Gift Intake Form

- Attach donation check to Employers Matching Gift form
- Submit with this completed sheet to your Team Captain
- Submit one form for each donation
- Only Employee contributions are eligible for matching
- Team will be credited when Matching Gift check is received by ACS

Team Name \_\_\_\_\_

Participant Name \_\_\_\_\_

Employee name \_\_\_\_\_

Matching Company Name \_\_\_\_\_

Amount of Donation \_\_\_\_\_

Date of Donation \_\_\_\_\_

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For ACS office use:

Date Request submitted \_\_\_\_\_

Amount of Matched Donation Recv'd \_\_\_\_\_

Date of Matched Donation Recv'd \_\_\_\_\_

Date Thank-you sent \_\_\_\_\_