



CCS Matching Gift Form

Mail or Fax to:
Creative Community Services, Inc.
1543 Lilburn-Stone Mountain Road
Stone Mountain GA 30087
Fax: 770-469-6210

Matching Gift Form for: _____
(Company Name)

Part A - TO BE COMPLETED BY DONOR

The Company will match contribution of up to _____ with a limit of _____ per calendar year

Please check one: Employee _____ Member of the Board _____

Name: _____
Home Address: _____
City/State/Zip Code: _____
Company Name/Division: _____
Work Location (city): _____ Daytime Phone: _____

Individual Gift

Minimum Contribution: \$50
Please specify the \$ amount to be
matched: \$ _____
Exact Date of Gift: _____

Group Gift: Made In honor of a person

Employee minimum contribution: \$25
given in support of:

participating in (event name):

AMOUNT OF GIFT: _____

Made by: _____ Cash _____ Check _____ Credit Card _____ Securities
Names: _____
#Shares _____

Organization Receiving Gift: _____
Address: _____

I certify that this gift meets with all the specifications as described in the company information as it relates to matching gifts. I am currently an eligible employee of _____ or a member of the Board of Directors of _____

Signature of donor: _____
Date: _____

Part B TO BE COMPLETED BY RECIPIENT INSTITUTION

1. Verify donor section. Fill out Part B Completely.
2. Mail this form along with a photocopy of the check, securities or proof of credit card donation to: Creative Community Services, Inc., 1543 Lilburn-Stone Mountain Rd., Stone Mountain GA 30087

I certify that this institution is recognized as a tax-exempt public charity (not a private foundation) by the IRS under Section 501 (c) (3) or Section 170 (c) (1). A copy of your Section 501 (c) (3) letter or Section 170 (c) (1) letter dated with the current year must be included. Failure to include this letter may prevent processing.

Donor: _____ Amount: _____ Date Received: _____
Organization: _____ Tax ID: _____
Address: _____ Phone: _____
City/State/Zip: _____
Signature of Officer (not a stamp) _____
Print or type Full Name and Title of Officer: _____