



## Matching Gift Donation

I have made a donation to LLS and requested a matching gift from my company.

Donor's Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Date of Donation: \_\_\_\_\_ Donation Amount: \$ \_\_\_\_\_

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

Team In Training Event: \_\_\_\_\_

***Please be sure to attach a copy of your original donation (check or credit card receipt) and send to:***

**Attn: Bookkeeper  
The Leukemia & Lymphoma Society  
Silicon Valley & Monterey Bay Chapter  
675 N. First Street, Suite 1100  
San Jose, CA 95112-5156**