

## The Kuntz Foundation Matching Gift Form

Date:

### DONOR INFORMATION

Name (First, MI, Last):

Male  Female

Address:

Area Code-  
Home #

City:

State:

Zip

Area Code-  
Cell #

Email Address:

**MATCHING GIFT MINIMUM OF \$100 / MAXIMUM OF \$1,000**

### MATCHING GIFT REQUEST INFORMATION

Grantee  
Organization:

EIN#:

Contact Name:

Phone #:

Email:

Street Address:

City:

State:

Zip:

Gift Amount to be matched: \$

### **SUPPORTING DOCUMENTATION REQUIRED:**

- Copy of Receipt or
- Copy of Canceled Check or
- Acknowledgement Letter

Please print and return the completed application and supporting documentation to:

The Kuntz Foundation Matching Gifts Program  
c/o RoseAnn Eckart  
The Dayton Foundation  
40 N. Main Street, Suite 500  
Dayton, OH 45423

or you may email all documentation to [reckart@daytonfoundation.org](mailto:reckart@daytonfoundation.org)