

Workplace Matching Gift Form

Donor Information

Name: _____

Email Address: _____ Phone Number: _____

Address: _____

Company Information

Employer Name: _____

Company Address: _____

Manager/HR Contact Person: _____

Manager/HR Contact Email/Phone: _____

Donation Details

Donation Amount: \$ _____ Donation Date: _____

Payment Method (Online Donation, ACH, Check #): _____

Request for Matching Gift

I hereby request that my employer matches my contribution to Solar One. I understand that the matching gift will further support Solar One's initiatives in sustainability and climate change education.

Solar One is a 501(c)(3) not-for-profit organization whose mission is to design and deliver innovative education, workforce training, and technical assistance in energy resources that fosters sustainability and resiliency throughout diverse urban environments. Learn more about our programs at solar1.org.

Solar One federal tax identification number: 52-2440116.

Contact development@solar1.org for more information.

Signature: _____

Date: _____