

Product Donation Form

CONTACT INFORMATION			
Name:		Company:	
Address:			
Phone:		Email:	

**If a charitable receipt should be sent to someone other than the contact specified above, please provide the following information:*

Name:		Email:	
Address:			

PRODUCT INFORMATION				
Description of Product (sizes, styles, types, color, etc.)	QTY.	UoM	Est. Value Per Unit	Expiration Date (if applicable)

What is the current condition of this donation? (circle one)			
New	Like New	Used	Other

If USED, please explain the history of this products usage prior to donation.

ACKNOWLEDGEMENT
<p>BY SIGNING BELOW, YOU ACKNOWLEDGE THAT IN NO WAY HAS WORLD HELP SOLICITED YOU OR YOUR AGENCY FOR THIS DONATION, BUT RATHER YOU OR YOUR COMPANY HAS AN ACTUAL NEED AND HAVE CHOSEN TO LIQUIDATE , REUTILIZE, AND/OR DONATE THIS PRODUCT FOR USE IN WORLD HELP'S CHARITABLE ACTIVITIES AROUND THE WORLD.</p> <p>ADDITIONALLY, YOU ACKNOWLEDGE AND RELEASE THE AFORMENTIONED DONATION TO WORLD HELP, TRANSFERRING TO WORLD HELP FULL OWNERSHIP AND VARIANCE POWER OVER THE DONATION AND ALLOWING WORLD HELP AND ITS CONSTITUENTS TO DETERMINE THE MOST APPROPRIATE END-USE OF THIS DONATION, BASED ON ITS ORGANIZATIONAL PRIORITIES AND/OR WHERE NEEDED THE MOST.</p>

Signature: _____

Date: _____