

Donation Confirmation Form

GENERAL INFORMATION				
Your Name		Company Name		
Address				
Phone	Fax	Email		
If tax receipt should be sent to someone other than the contact specified above, please provide the following:				
Name		Email		
Address				
DONATION INFORMATION				
Description of product (sizes, styles, types, color, etc.) <i>Please provide pictures of product, if available</i>	# of units	Price per unit	Total price	Expiration date, if applicable
Total value of donation		\$		
Select the formula that most accurately reflects the valuation basis being used				
<input type="checkbox"/> Cost value <input type="checkbox"/> Fair market value <input type="checkbox"/> Wholesale value <input type="checkbox"/> Retail value <input type="checkbox"/> Other (please explain)				
What is your preference for distribution of your donation?				
<input type="checkbox"/> Domestic only <input type="checkbox"/> International only <input type="checkbox"/> Where most needed (domestic or international)				
Additional restrictions, if applicable				
LOGISTICS INFORMATION				
Timeline for donation to be shipped		Are you able to provide transportation for your donation to a destination within the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Name of shipping contact		Telephone	Email	
Address of product location				
Estimated donation quantity at pick up location				
Pallets:		Truckloads:	Other:	
How will the product be shipped?				
On pallets:		Floor loaded:	Other:	
SIGNATURE				
Signature		Date	Title	

World Vision
 P.O. Box 9716
 Federal Way, WA 98063
 (888) 511-6443 Fax (253)-815-3442 Email: GIKDonations@worldvision.org