

Alaska Medical Missions

Medical Supply and Equipment Request Form

The following form is <u>required</u> in order to receive medical supplies and equipment from Alaska Medical Missions for your organization. This form provides an overview of your working situation and allow us to respond to the request in the fullest and most appropriate way possible. Once submitted, you will hear from AMM within 3 weeks regarding AMM's ability to assist your program/mission and to what extent.

This form is also available online at www.alaskamedicalmissions.org/request/. The print version of this form should be scanned and submitted via email to info@alaskamedicalmissions.org or sent via mail to:

Alaska Medical Missions Attention: David Rurik 1805 Academy Drive Anchorage, AK 99507

If approved, AMM will work with you to arrange pick up or shipment depending on your needs.

If approved, the supplies and equipment committed to your request will be held for 30 days, after which time they will be placed back into our warehouse inventory, released on a first come first served basis, and may not be available for your project in part or in whole. (This allows your organization time to arrange and fundraise for shipping if necessary).

Page 2: Organization Information

Page 3: Requested Supplies

Page 4: Donation Documents, Acknowledgement and Signature

AMM looks forward to partnering with you as you provide better healthcare around the world.

Take Good Care,

David Rurik
Alaska Medical Missions | Executive Director
907-522-7202 | alaskamedicalmissions.org

AMM Staff Use Only:	
Date Received//	
Product Hold Until Date / /	

Alaska Medical Missions Medical Supply and Equipment Request Form (PLEASE PRINT LEGIBLY)

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AMM Staff Use Only:
Date Received//
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- 2. Requested Supplies Provide an itemized list of medical supplies and equipment:
 - a. Please provide item name, quantity, and expiration requirements.
 - b. Please attach a second page or separate list if more space is required.

Product	Quantity	Expiry
Toward wield two /ahim we out date:		
 c. Target pick-up/shipment date:		er (final
Most recipients of AMM supplies and equipment pick them up fro Anchorage, Alaska. AMM generally does not provide shipping. Happropriately prepared for shipment. Should your organization neshipment AMM can provide this service to be paid for by the application. These arrangements will be made separately from the service to be paid for by the application.	lowever, supp red assistance icant or recipi	lies will be in arranging ent
AMM Staff Use Only: Date Received// Product Hold Until Date / /		

3. Donation documents:
AMM provides an itemized list and a letter of donation for each shipment. Does AMM
need to provide any other documents to ensure delivery of SUPPLIES to the receiving
destination? Y / N Please specify if 'yes':
4. Acknowledgement and Signature:
In order to receive a donation of AMM medical supplies and equipment (SUPPLIES) you
must acknowledge your agreement to the following terms and conditions by initialing
each statement and signing below.
a. I will ensure that all SUPPLIES donated to me/my organization will be distributed
free of charge and without discrimination of any nature, include race, religion,
gender, politics, nationality, or geographic location.
b. If an administrative fee for service is charged by my organization or the medical
facility where services are performed, I will ensure that this fee is not identified
with the SUPPLIES.
c. I will not return any donation to the United States.
d. I will not sell or exchange any donation for property or services.
e. SUPPLIES committed this request will be held for 30 days while shipment/pick-u
is arranged, after which time they will be placed back into our warehouse
inventory, released on a first come first served basis, and may not be available
for your project in part or in whole.
f. I will provide AMM with narrative feedback, including photographs, reports,
distribution information, or program evaluations for each shipment
received.
Name, position, and signature of the representative of the applicant organization
acknowledging this agreement:
Name (animal)
Name (print): Signature:
Position: Date:
Maska Madisal Missions is motivated by the love of Christ to
Alaska Medical Missions is motivated by the love of Christ to provide medical resources and professional support to
communities in need around the world.
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