

Nihon Kohden Charitable Contribution Application

To avoid delays please ensure all printed information is legible.

Print Form

Date Submitted _____

Contribution Requested by Date: _____

Type of Contribution Required Monetary

Requested Contribution Amount

Request Form

Product

Please check if applicant or payee is located in Massachusetts or Vermont

I. Applicant Information *The Applicant name and the Tax ID number provided on this form MUST match the W-9 provided with your submission*

No PO Boxes. Please enter physical address ONLY.

Contact Information (please include email address to facilitate communication)

Applicant Name

Contact Person

Applicant Address

Email

Address 2

Phone

Address 3

Fax

City State Zip

If not in US, City/Country

Applicant Website Address

Please check if applicant is recognized as a 501(c)(3) entity

Federal Tax ID Number

If other non-profit please describe

II. Charitable Events Information/Purpose of Request

Nihon Kohden considers requests only for Charitable Events that are submitted at least 45 days prior to the Contribution Request by Date

Charitable Event Name

Date(s) Through Location: City State

Proceeds of Event to Benefit (insert name if different than Recipient)

Is this request part of a general fundraising effort? Yes No

Please describe the Charitable Event/ Contribution purpose and how funds will be used

Is any portion of the contribution for exhibit space, advertisement or other items? Yes No

If yes, please provide details (including applicable amount)

Please enter the nature and amount of donation that Nihon Kohden has provided in past year(s) if any

III. Non-Monetary (Product) Contribution

Please note: For product contributions Nihon Kohden will ship only domestically. Recipient will be responsible for internal shipments including any and all fees, licenses, or other documentations as applicable for use for international indigent patient care.

Product	Quantity	Retail Price	Extended Retail Price

Total Retail Value of Product Contribution _____

IV. Additional Information/Comments

V. Supporting Documentation

In addition to the completed request form the following documents must be included:

- **A Letter of Request on the Recipient's letterhead**
- **A copy of the Charitable Event brochure, flyer, invitation, and/or agenda (if applicable)**
- **W-9**
- **IRS Tax-Exemption Determination Letter**

VI. Certification of Compliance

Nihon Kohden will not make a charitable contribution that implicitly or explicitly rewards a customer for past or future purchases, uses, orders, or recommendations of Nihon Kohden products. Any evidence that a charitable contribution is tied in any way to the past, present, or future use, order, recommendation or purchase of Nihon Kohden products will result in denial, and may exclude the organization from consideration for future funding. By signing below the Applicant understand, agrees and certifies:

- 1) All information on this Charitable Contribution Request Form is true and accurate to the best of the Applicant's knowledge;
- 2) Neither Applicant nor Nihon Kohden, including their respective personnel, contractors or agents, have stated or implied, explicitly or implicitly, that this donation is intended to provide prohibited remuneration or impose a requirement for the purchase, use, order or recommendation of Nihon Kohden product.

If, for any reason, you find that you cannot complete this certification or if you have any questions regarding this certification please contact Nihon Kohden's Grants Committee via email at Grants@nkusa.com to discuss your concerns.

Signature of Person Completing Form Date
Printed Name of Person Completing Form

PLEASE SUBMIT YOUR COMPLETED REQUEST FORM AND ALL SUPPORTING DOCUMENTATION TO NIHON KOHDEN'S GRANTS COMMITTEE VIA FAX (949) 271-5675 OR VIA EMAIL Grants@nkusa.com

Nihon Kohden provides all charitable donations and follows disclosure requirements in accordance with applicable and federal laws.

FOR NIHON KOHDEN USE ONLY

Approved Declined

Comments

Grants Committee Approval Signature _____ Date _____