

DONATION AGREEMENT

The undersigned parties:

Médecins Sans Frontières-(section) represented

by.....and

.....
 represented bydeclare that
 the following items are donated by **Médecins Sans Frontières-(section)** without any exchange
 of currency.

N°	Item	Brand	Qty	ID-number
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

The listed items are donated under the condition that they will be used exclusively for

.....

failing which **Médecins Sans Frontières-(section)** will reclaim the property by rights.

Médecins Sans Frontières-(section)

The representative

The representative

Name.....

Name.....

Signature.....

Signature.....

Date and place.....

Date and place.....