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| **Appendix H**  **Emergency Donation Notification Form** |
| To be completed by the responsible employee that made the Emergency Donation |
| **Section 1: Entity Background Information** |
| 1. Specify if the Emergency Donation recipient is:   Government Entity  NGO  Individual (first responders or victims) ☐ Other (if other, please explain):  Click or tap here to enter text. |
| 1. Name of Emergency Donation Recipient: |
| 1. Emergency Donation Recipient Address (include website if Government Entity / NGO): |
| 1. Name and Title of Primary Contact: |
| 1. Emergency Donation Recipient Telephone Number: |
| 1. Email Address of Primary Contact: |
| **Section 2: Description of the Donation** |
| 1. Please describe the purpose of the Donation, including information related to the event that caused the immediate humanitarian need: |
| 1. Please describe the Emergency Donation by type, quantity and individual value:  |  |  |  | | --- | --- | --- | | **TYPE (GOOD/FOOD/MONEY)** | **QUANTITY** | **VALUE** | |  |  |  | |
| 1. Please describe how/where the Donation was delivered: |
| 1. Date of Delivery: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Section 3: Certification** |
| I hereby certify that the information provided above is true and correct, to the best of my knowledge. I also certify that the Emergency Donation (described in Section 2) provided by [Walmart] was not for the benefit of or use by any Government Official in his/her individual capacity, or any Family Member or Close Business Associate of a Government Official, and that the goods donated were or will be used only as described above. I further certify that this Emergency Donation was made in strict compliance with Walmart’s International Giving Procedures and Walmart’s Global Anti-Corruption Policy.  Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Please return this completed form to A/C Compliance.** |