

Internal Reference Number

## ***Make a Donation – Form***

Contact Information	
Name	
Email Address	
Phone Number	

If you have products or equipment to donate at this time, please describe your items in the fields below.

**Please note that only unused, unexpired, fully functional and sealed in the original packaging items will be accepted.**

### **Donation Guidelines**

- All items must have at least 6 months left until expiration
- No pharmaceuticals/medications
- Items have not had patient contact

Donation item	
Product	
Quantity	
Condition	
Expiration Date	
Additional Information	

**Please send the completed form to [ElmhurstAuxiliary@nychhc.org](mailto:ElmhurstAuxiliary@nychhc.org)**

All completed donations will be acknowledged by the Elmhurst Auxiliary.

For any monetary donation, please visit this link: <https://www.supportelmhurst.org/donate>

**On behalf of our patients and the Elmhurst Auxiliary, Thank You!**