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(email) recover@obesityaction.org

Questions? Call 800.898.6888



Required statement for contribution of Bariatric Advantage inventory

(**All fields are required to be completed—incomplete forms are not able to be processed)

In accordance with Reg. 1.170A-4A(b)(4),

This statement is submitted by (Name of Program's Representative)** _____

with email address** _____ and phone** _____

of the Bariatric Surgical Program located at ** _____

On behalf of (Name of Patient)** _____ (the donee-“Patient”), we request that

inventory ship to: Patient's Street Address** _____

Patient's City** _____ State** _____ ZIP code** _____ Phone** _____

Patient's email address** _____

Information provided pursuant to Reg. 1.170A-4A(b)(4):

1. Subject to availability of Bariatric Advantage (BA) inventory, description of property to be received by Patient:

Multivitamins	Calcium	Iron
<input type="checkbox"/> Gastric bypass or gastric sleeve chewable 90-day supply <input type="checkbox"/> Adjustable gastric band chewable 90-day supply <input type="checkbox"/> Duodenal switch chewable 90-day supply	<input type="checkbox"/> Chewable 90-day supply	<input type="checkbox"/> 18 mg chewable 90-day supply <input type="checkbox"/> 60 mg chewable 90-day supply

2. The above-described property's use will be related to the tax-exempt purpose of the Obesity Action Coalition (the "Donee-Organization" or "OAC") for the care of the ill, the needy, or minors [as defined in IRC Sec. 170(e)(3) and Reg. 1.170A-4A(b)(2)], on a one-donation per patient basis, subject to exception approval by BA and OAC.

3. The above-described property will be used in accordance with Reg. 1.170A-4A(b)(3) (i.e., the Donee-Organization or any transferee of the Donee-Organization will not require or receive any money, property, or services for the transfer or use of the property).

4. The Donee-Organization is described in IRC Sec. 501(c)(3), is exempt from tax under IRC Sec. 501(a), and is not a nonoperating private foundation as defined in IRC Sec. 509(a).

5. The Donee-Organization will maintain appropriate books and records as defined in Reg. 1.170A-4(b)(4) and will make such records available to the IRS upon request.

Signature _____ Date _____

(signature must be by an authorized representative of the Bariatric Surgical Program identified above)

Bariatric Advantage, 25 Enterprise, Suite 200, Aliso Viejo, CA 92656, 800.898.6888