



DONATION CARGO SHIPPING APPLICATION (please type all information)

NAME OF NON-PROFIT ORGANIZATION: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

CONTACT PERSON: _____

TELEPHONE NO.: _____ FAX NO.: _____

E-MAIL ADDRESS: _____

A SCANNED COPY OF YOUR 501(C)(3) CERTIFICATE MUST BE SUBMITTED WITH THIS APPLICATION. IN ADDITION, PLEASE PROVIDE INFORMATION ABOUT THE CHARITABLE ACTIVITIES OF YOUR ORGANIZATION AND THE CONSIGNEE ORGANIZATION IN LIBERIA.

NAME OF CONSIGNEE IN LIBERIA: _____

ADDRESS OF CONSIGNEE IN LIBERIA: _____

TELEPHONE NO. OF CONSIGNEE IN LIBERIA: _____

Detailed Description of Proposed Cargo (Attach list/description if space provided is not enough):

ESTIMATED VALUE US\$ _____ PROPOSED SHIP DATE: ____/____/____

Packing Description:

20-FT CONTAINER WEIGHT (LBS) _____

SHIPPER HEREBY CONFIRMS, BY SIGNING BELOW, THAT THE GOODS BEING SHIPPED WILL NOT BE SOLD, OFFERED FOR SALE, OR OTHERWISE USED FOR POLITICAL OR PRIVATE COMMERCIAL PURPOSES.

Authorized Signature

For Firestone Use Only:

Application received ____/____/____ Corp. Approval/Denial _____ Date ____/____/____

Ref. # Assigned _____ Shipper Notified ____/____/____

Fees Due to L&C Marine \$ _____ Vessel Assigned _____
