Dear ,

I am writing to thank you for your recent donation of material to the Ambulance Museum, Victoria. Your generosity will help us preserve the important history of the Ambulance Service in Victoria.

To formalize your donation, could you please sign both copies of the attached deed of gift form and return one copy to me. The second copy is for your own records.

Once again, thank you for your generosity.

Yours sincerely,

**Ambulance Historical Society of Victoria**

**1/55 Barry Street Bayswater**

**Victoria Australia**

**GIFT AGREEMENT**

I/we (the donor) acknowledge that I/we are the legal owner(s) of the object(s) described below or on the attached pages, and hereby donate this material to become the property of the Ambulance Historical Society of Victoria. The Ambulance Historical Society of Victoria will consider this material as unrestricted gifts that may be used in any manner that is deemed in the best interests of the Society.

**Description of object(s):**

Having read and understood the conditions listed below and certifying that I/we am/are the sole unencumbered owner(s) of the above mentioned objects, free from all claims, I/we donate the material herein to the Ambulance Historical Society of Victoria.

**History of object(s) and donors connection to them** (use reserve of page if more space is needed)**:**

**Name of Donor**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact (if other than donor)**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Preferred form of name, to be used as credit line in exhibition labels**

(please specify, or write “Private Donor” if you wish to remain anonymous):

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNATURE**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** (Donor or contact? Please circle one)

**CONDITIONS OF GIFT**

By execution of this Gift Agreement the Donor acknowledges that:

He/she gives, to the Ambulance Historical Society of Victoria all title and interest in the goods and property including rights of Copyright, if applicable, to the Society absolutely.

The objects irrevocably become the property of the Ambulance Historical Society of Victoria, and may be displayed, stored, maintained and disposed of as the Society sees fit.

Due to limited space and the policy of changing exhibitions, the Ambulance Historical Society of Victoria makes no commitment, and is in no way obligated, to exhibit the object(s).

**TO BE COMPLETED BY AHSV REPRESENTATIVE**

I hereby accept the material described above on behalf of the Ambulance Historical Society of Victoria. Receipt of the above is acknowledged with thanks.

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TITLE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TO BE COMPLETED BY DONOR**

I hereby donate the material described above to the Ambulance Historical Society of Victoria.

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TITLE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_