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DONATED MEDICAL AND SCIENTIFIC EQUIPMENT

I (FULL NAME)

OF (STATUS IN ORGANISATION)

DECLARE THAT THE ABOVE NAMED ORGANISATION IS BUYING FROM:

(NAME AND ADDRESS OF GOODS SUPPLIERS)

THE FOLLOWING GOODS OR SERVICES:

AND IS PAYING FOR THIS SUPPLY WITH FUNDS PROVIDED ENTIRELY BY A CHARITY OR FROM VOLUNTARY CONTRIBUTIONS.

*I ALSO DECLARE THAT THE GOODS ARE TO BE USED SOLELY IN MEDICAL RESEARCH, DIAGNOSIS OR TREATMENT.

I CLAIM THAT THE SUPPLY IS ELIGIBLE FOR THE RELIEF FROM VAT UNDER GROUP 16 OF THE ZERO RATED SCHEDULE TO THE VAT ACT 1983

(SIGNATURE)

(DATE)

*Delete if not applicable

WARNING :- THERE ARE SEVERE PENALTIES FOR MAKING A FALSE DECLARATION. IF YOU ARE IN ANY DOUBT ABOUT YOUR OWN ELIGIBILITY OR THE ELIGIBILITY OF THE GOODS OR SERVICES YOU ARE BUYING YOU SHOULD GET ADVICE FROM ANY LOCAL VAT OFFICE BEFORE SIGNING THIS DECLARATION.