



CARITAS
For Children

Caritas for Children

7400 W. National Avenue
Milwaukee, WI 53214

Phone: 888-CARITAS
888-227-4827

Fax: (414) 771-3528

Vehicle Donation package

Your donation to *Caritas for Children* may be **tax deductible!**

Caritas For Children is A 501(c)(3)- Wisconsin Non-Stock Corporation Organization

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To donate your vehicle please provide the information requested on the following pages and send **together with vehicle title**

to Caritas for Children at 7400 W. National Avenue, Milwaukee, WI 53214.

Caritas for Children will then make all necessary arrangements to have your vehicle picked up.

Note: Remember to include vehicle title when forwarding this package to Caritas for Children.

If the vehicle title is lost or otherwise unavailable please call Caritas for Children at 888-CARITAS for assistance in obtaining a replacement.

Vehicle Donation

Donor and Vehicle Information

Your donation to *Caritas for Children* may be **tax deductible!**

Donor		
NAME:		
STREET ADDRESS:		
CITY:	STATE:	ZIP:
HOME PHONE:	WORK PHONE:	

Vehicle		
MAKE:	MODEL:	
BODY TYPE: <i>sedan/coupe/wagon</i>	COLOR:	
*VIN: <i>vehicle identification number</i>	YEAR: <i>of manufacture</i>	
CONDITION: <input type="checkbox"/> MINT <input type="checkbox"/> GOOD <input type="checkbox"/> FAIR <input type="checkbox"/> POOR	DRIVEABLE: YES / NO	

* VIN is available from your vehicle title and can also usually be viewed from the outside of the vehicle through the windshield (driver's side).

Pickup Information (if different from donor information)		
CONTACT NAME:		
PICKUP ADDRESS:		
CITY:	STATE:	ZIP:
DAY PHONE:	EVENING PHONE:	
E-MAIL ADDRESS:	FAX NUMBER:	

How did you hear about Caritas?	
I received information about "Caritas for Children" through my...	
<input type="checkbox"/>	Parish: _____
<input type="checkbox"/>	Paper / Publication: _____
<input type="checkbox"/>	Catholic Charities (Please list location): _____
<input type="checkbox"/>	Other: _____

Odometer Disclosure Statement

Federal law (and state law, where applicable) requires that you state the mileage upon transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.

I, _____, STATE THAT THE
(Name as it appears on Vehicle Title – Please Print)

5 DIGIT ODOMETER (OF VEHICLE DESCRIBED BELOW) NOW READS • and no tenths

OR

6 DIGIT ODOMETER (OF VEHICLE DESCRIBED BELOW) NOW READS • and no tenths

Please check as appropriate

MILES AND TO THE BEST OF MY KNOWLEDGE THAT IT REFLECTS THE ACTUAL MILAGE OF THE VEHICLE DESCRIBED BELOW, UNLESS ONE OF THE FOLLOWING STATEMENTS IS CHECKED.

I hereby certify that to the best of my knowledge the odometer reading reflects the amount of mileage in excess of its mechanical limits. I hereby certify that the odometer reading is NOT the actual mileage.

WARNING—ODOMETER DISCREPANCY

Vehicle			
MAKE:	MODEL:	YEAR:	
VIN:	BODY TYPE: (Sedan/Coupe/Wagon)	COLOR:	
THIS VEHICLE WAS PREVIOUSLY (Check all that apply):			
<input type="checkbox"/> Business Vehicle	<input type="checkbox"/> Driver Education	<input type="checkbox"/> Flood Damaged	<input type="checkbox"/> Junked
<input type="checkbox"/> Demonstrator	<input type="checkbox"/> Executive Driven	<input type="checkbox"/> Glider Kit	<input type="checkbox"/> Leased
<input type="checkbox"/> Government Vehicle	<input type="checkbox"/> Manufacturer Buyback	<input type="checkbox"/> Rebuilt Salvage	<input type="checkbox"/> Theft Recovery
<input type="checkbox"/> Police Vehicle	<input type="checkbox"/> Rental	<input type="checkbox"/> Unknown	
<input type="checkbox"/> Privately Driven	<input type="checkbox"/> Taxi		

Transferor/Seller		
NAME:		
STREET ADDRESS:		
CITY:	STATE:	ZIP CODE:

X _____
TRANSFEROR'S SIGNATURE TRANSFEROR'S NAME (Printed) DATE

For Official Use Only

Transferee/Buyer		
NAME:		
STREET ADDRESS:		
CITY: Note:	STATE:	ZIP CODE:

RECEIPT OF COPY ACKNOWLEDGED

X _____
TRANSFEREE'S SIGNATURE DATE AGENT (Printed) DATE

Limited Power of Attorney

The undersigned _____ ,
(Name as it appears on Vehicle Title)

hereby appoints and constitutes Caritas for Children, Inc., its Officers and Authorized Employees to execute all Certificates of Title; Federal Odometer Statements; and other such documents as may be required to convey to purchasers good titles to vehicles consigned on behalf of the undersigned.

by _____
(Donor)

by _____
(Donor)

Subscribed and sworn before me this _____ day of _____ in the year _____

by _____
(Notary Public)

My commission expires: _____