

Mobility Worldwide Affiliate _____
Production and Distribution Report

Please return this document via e-mail to: driggsv@mobilityworldwide.org

Thank you for doing your part to help Mobility Worldwide keep accurate records.

1. Number of units produced this past quarter _____
2. Number of finished units currently on hand at your location. _____
3. Number of units shipped or given to distribution partners. _____
4. Number of volunteers serving through your affiliate. _____
5. Combined volunteer hours served at your affiliate. _____
6. Please list the following information for the persons or organizations with whom you have entrusted your Mobility Carts.

Organization name or Individual _____

Telephone Number _____

E-mail address _____

Mailing address _____

The location in the U.S. where you delivered the units (if not picked up at your shop)

To which country are the units destined _____

Organization name or Individual _____

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E-mail address _____

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