



YOUNG LIVING FOUNDATION	DONATION FORM
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Member Name	Member Number
Phone	Email

PROGRAM	Monthly	One-time	Percent
Ecuador Earthquake Relief			
Rebuild Nepal			
African Hearts Slum Program			
Sole Hope Jigger Treatment			
Healing Faith Malaria Program			
Young Living Academy Ecuador, <small>Sponsor a Child* \$75/month</small>			
Croatia Orphanage			
General Donation			
TOTAL	\$	\$	%

\*If you have any preferences with respect to your sponsored child, please indicate here:

Gender	Age	Grade Level
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Commission Check Deduction	_____ (Y/N)
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I authorize Young Living Essential Oils to withhold the amount below from my monthly commission check, which will be donated to the Young Living Foundation. This will remain in effect until further written notice is provided to Young Living Essential Oils.

Signature	Date
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- Commission check deductions will begin to be applied in the month in which this form is received by Young Living Essential Oils. No deduction will be made if the amount of the donation exceeds the amount of the commission check. Donations will be deducted after all applicable adjustments and maintenance fees have been applied.
- You will receive a yearly donation statement from the Young Living Foundation to keep for your tax records.
- Donations made to the Young Living Foundation will not reduce or adjust your 1099 statement earnings amount. (Applicable to US Distributors only.)
- As per standard policy, if the commission check amount falls below \$25 after all deductions have been made, all remaining funds will be applied to the member's Young Living account.

Visa	MasterCard	AMEX	
Discover	Check	Cash	
Name of Cardholder			
Credit/Debit #		Exp. Date	Sec Code
Address	City	State	Zip
Cardholder Signature	Date		

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 EMAIL – [brdavis@youngliving.com](mailto:brdavis@youngliving.com) FAX – 801.418.8854