



C/O the Law Office of Lau & Associates, LLC
10517 West Drive, Unit B
Fairfax, VA 22030
M-Lau@Michaelnlau.com
703-637-0488 (Phone)
703-644-4303 (Fax)

I/We (name or organization) _____

Located at (address) _____

with a contact telephone number of _____, email address of _____,

website address of _____, unreservedly acknowledge(s)

that CAPAVA is a non-profit organization not engaging in the commercial manufacturing, testing, or selling personal protection equipment (PPE). I/We acknowledge that CAPAVA is merely trying to help the society-at-large in the midst of a pandemic by distributing, free of charge, PPE it has received through donations or purchased through donated money. CAPAVA merely distributes the PPE as received and has not conducted independent testing or quality verification. CAPAVA does not give any warranty, neither expressed nor implied, of the quality of the PPE, or their feasibility for any particular use. By accepting the PPE, I/We unreservedly waive, disclaim any and all legal rights against CAPAVA and its members. By accepting the PPE, I/We unreservedly agree not to disparage the reputation of CAPAVA and its members.

_____ (Signature)

_____ (Print Name)

_____ (Title)

_____ (Date)

_____ (PPE Received)