## **Letter of Donation**

Date: [Insert Date]

[Your Name] [Your Organization] [Your Address] [City, State, Zip Code] [Email Address] [Phone Number]

[Recipient Name] [Recipient Organization] [Recipient Address] [City, State, Zip Code]

Dear [Recipient Name],

On behalf of [Your Organization], I am pleased to inform you that we are making a donation of medical equipment to support your invaluable health initiatives. We are dedicated to improving community health and believe that this contribution will greatly benefit those in need.

Enclosed with this letter, you will find the details of the equipment being donated:

- [Description of Equipment 1]
- [Description of Equipment 2]
- [Description of Equipment 3]

We hope this donation will assist [Recipient Organization] in furthering its mission to provide quality healthcare services. Please let us know the most convenient time for the equipment pickup or if you require any additional information regarding the items.

Thank you for your commitment to improving health outcomes in our community. We look forward to hearing from you soon.

Sincerely, [Your Name] [Your Title] [Your Organization]