**To. ISEA foundation**

**【Application for Sample】**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| NO | Model | Size | Price(＄) | Quantity |
| 1 | for vehicle | 110×75×20, 110g | 120 |  |
| 2 | for home | 200×40×20, 200g | 140 |  |
| 3 | fan type | 130π×1150, 4Kg | 340 |  |
| 4 | 100㎡ type | 270×270×770, 14Kg | 1250 |  |

**※ An applicant is in charge of delivery fee. And the amount of the fee may vary depending on standard of international shipping fee. / The product price is will be increased.**

**【Request for MobiDollar, COVID-19 Care Fund 】**

Step 1. Request for 50% of the purchase amount of fund

Step 2. Make cash payment for 50% of the total purchase amount when request for purchase

Step 3. Make MobiDollar (or COV) payment for 50% of the total purchase amount after receiving quarantine product

|  |
| --- |
| Request amount for fund: I request for the amount of (USD ) in MBR (or COV).Requesting organization :Name of the person in charge :E-mail address of MOBICOINS WALLET : |

- Check Point -

1. Do you want to receive samples of ‘COVID-19 OUT purifiers’ (two to five) with complete recovery examples of group treatment regarding COVID-19 confirmed cases? (Yes or No)

2. Are you interested in setting up a virus treatment center in your city once the well-grounded treatment data is confirmed? (Yes or No)

3. Do you have the intention of receiving a ‘Cryptocurrency MobiDollar Fund’ (or COV, another type of cryptocurrency for COVID-19 disaster support)? (Yes or No)

4. Do you agree on issuing a certificate of an expert which is certified by the ISEA foundation under ‘Article 4 of the A/HRC/45/NGO/3 a joint written statement of the UN General Assembly? (Yes or No)

We accept the policy and work and request for the MobiDollar, COVID-19 Care Fund as above

**Name of the requesting organization:**

**Name of the person requesting:**