November 3rd, 2005

Attn: Depot Operator

RE: New Paint Exchange Form

Attached is our new Paint Exchange Form and instructions on how to use it. Please start using this new form this month (November).

We would also like to remind all depots that the Paint Exchange program is ONLY for PAINT CANS. No other items are to be given away not even Aerosol Paints.

Thank you for your time and cooperation with this new form. If you have any questions please do not hesitate to call or email.

Regards,

Lori Kobza
Service Coordinator

Email: lkobza@productcare.org
PAINT EXCHANGE PROGRAM

The Paint Exchange program allows consumers to take paint away from the depot free of charge for reuse. Consumers must be made aware that the paint is on a “AS IS” basis and we cannot guarantee quality. They are to read the Paint Exchange form prior to signing it as it is a Release Form. A Waiver/Liability Release sticker must be placed on each container the consumer takes. No opening of any container is allowed.

Because most of the forms are faxed – whenever possible:
- Please print
- Please use blue pen
- Please stop writing when the lines are used up. It’s okay to start a new form even if it’s only for 1 person

INSTRUCTIONS FOR PAINT EXCHANGE PROGRAM:

1. Print the Depot name and full mailing address. Please see sample of completed form on second page.

2. After the consumer has chosen what paint they will be taking, while you are putting on the Waiver/Liability Release Sticker on every container that goes out, please have the customer complete the Monthly Paint Exchange Form by:

3. They print the date they are taking the paint

4. They print their name or their organization’s name and then write their signature.

5. They print their phone number or the phone number of their organization

6. Sort out the sizes of the containers – 5 gallon or 1 gallon so that you can complete the Quantity section of the form. We are only tracking 1 gallon or larger sizes. If the container size is smaller than 1 gallon there is no need to record it. Only write down the size of the container – do not estimate what the contents are.

7. Determine if the paint is Latex (Water Based) or Alkyd (Oil Based)

8. If the paint is Latex, write the number of containers being taken in the correct column. For example, if 3 – 5 gallon containers and 6 – 1 gallon containers are being taken then in the 5 gal column write 3 and in the 1 gal column write 6.

9. If the paint is Alkyd, write the number of containers being taken in the correct column. For example, if 2 – 5 gallon containers and 8 – 1 gallon containers are being taken then in the 5 gal column write 2 and in the 1 gal column write 8.

10. At the end of the page, add up the total number of containers and write this number in.

11. At the end of each month the Monthly Paint Exchange Form is sent to Product Care’s office in Surrey, BC and must be received by the 10th of the month.
MONTHLY PAINT EXCHANGE FORM

THIS DOCUMENT IS A LIABILITY RELEASE FORM – PLEASE READ IT CAREFULLY

TO: Product Care Association AND TO: ________________________________

Depot Owner/Operator – Depot Name and Address (Full Mailing Address)

• I confirm that the product (the “Product”) received by me today is offered as part of a free “Paint Exchange”. I also acknowledge that Product Care, the Depot Owner/Operator and all other organizers, sponsors and contractors of the Paint Exchange (collectively the “Sponsors”) make NO REPRESENTATION OR WARRANTY AS TO THE MERCHANTABILITY, QUALITY, CONTENTS OR ORIGINS OF THE PRODUCT OR TO THE FITNESS OF THE PRODUCT FOR ANY PURPOSE.

• I accept the Product “as is” and I acknowledge that the Product has not been inspected by any of the Sponsors. I ACCEPT ALL RISKS ASSOCIATED WITH ANY USE OF THE PRODUCT WHATSOEVER. In consideration for the Product, I release the Sponsors from all claims, damages, losses, causes of action, or actions arising from the receipt and/or use of the Product. I am aware that by signing this release, I am waiving all legal rights against the Sponsors in relation to the acceptance and use of the Product.

• The term “Product Care” as used in this release includes the Product Care’s members, officers, directors, employees, agents and contractors.

• I acknowledge that if I have any reason to suspect that the Product has been altered in any way or that the contents are not represented by the original label information, I should not use the Product and I may return it to any Product Care Authorized Paint Collection Depot in my area without charge.

<table>
<thead>
<tr>
<th>DATE: (Please Print)</th>
<th>NAME: (Please Print)</th>
<th>SIGNATURE: (Confirming Release of Liability)</th>
<th>PHONE NUMBER: (Please Print)</th>
<th>LATEX Container Size</th>
<th>ALKYD (OIL) Container Size</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<td></td>
<td>5 GAL</td>
<td>1 GAL</td>
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<td>5 GAL</td>
<td>1 GAL</td>
</tr>
</tbody>
</table>

CONTAINER TOTALS:

Depot Operator’s Name (Please print) Signature Date
**SAMPLE ONLY**

<table>
<thead>
<tr>
<th>Container Size</th>
<th>1 GAL</th>
<th>5 GAL</th>
<th>15</th>
<th>45</th>
<th>8</th>
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</thead>
</table>

<table>
<thead>
<tr>
<th>Container Size</th>
<th>3</th>
<th>6</th>
<th>12</th>
</tr>
</thead>
</table>

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**CONTAINER TOTALS:**

<table>
<thead>
<tr>
<th>555-666</th>
<th>444</th>
<th>333</th>
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<table>
<thead>
<tr>
<th>Signature</th>
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</thead>
<tbody>
<tr>
<td>John Smith</td>
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<table>
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<tr>
<th>Date</th>
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<tbody>
<tr>
<td>Feb 18</td>
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<table>
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<tr>
<th>Date</th>
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<tbody>
<tr>
<td>Feb 10</td>
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<table>
<thead>
<tr>
<th>Date</th>
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<tbody>
<tr>
<td>May 1st, 2005</td>
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<table>
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<tr>
<th>Date</th>
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<tbody>
<tr>
<td>June 1st, 2005</td>
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**WARNING:**

- I accept the Product "" as is and acknowledge that the Product has not been inspected by any of the Sponsors. I accept all risks associated with any use of the Product.

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**CONTENTS OR ORIGINS OF THE PRODUCT OR THE FITNESS OF THE PRODUCT FOR ANY PURPOSE:**

- I certify that the Product (the Product) received by me today is delivered as part of a free paint exchange.
- I also acknowledge that Product Care SuperCenters are not to be held liable for any damage or loss of any kind.
- I also certify that the Product (the Product) received by me today is delivered as part of a free paint exchange.
- I also acknowledge that Product Care SuperCenters are not to be held liable for any damage or loss of any kind.

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**DO NOT MAIL THIS FORM**

**TO:**

Product Care Association

**12337-82A Ave, Surrey, B.C. V3W 5L5**

**FAX:** 604-592-2982

**MONTHLY PAINT EXCHANGE FORM**

**DATE**

**SIGNATURE**

**DEPARTMENT OPERATORS NAME (PLEASE PRINT)**

**Sam Sales**

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