

Tax-Deductible Contribution Receipt

Receipt No:

Date Issued:

Federal EIN:

Tax Status: 501(c)(3) Organization

DONOR INFORMATION

Donor Name:

Address:

City, State, Zip:

DATE RECEIVED	CONTRIBUTION DESCRIPTION / FUND	METHOD	AMOUNT (\$)
Total Deductible Contribution:			

Thank you for your generous contribution. No goods or services were provided in exchange for this contribution other than intangible religious benefits. Please retain this receipt for your tax records.

Authorized Representative

Signature

Title / Office

Date

