
DONATION RECEIPT

Receipt No: _____

Date: _____

DONOR INFORMATION

Donor Name: _____

Address: _____

Phone: _____

Email: _____

DESCRIPTION OF DONATED EQUIPMENT

ITEM	DESCRIPTION / SPECIFICATIONS	MODEL / SERIAL NUMBER	QTY	APPRAISED VALUE
1				
2				
3				
4				

The organization certifies that no goods or services were provided in exchange for this contribution other than those of intangible religious or educational benefits. Please retain this receipt for your tax records.

AUTHORIZED REPRESENTATIVE SIGNATURE

Name & Title

DONOR SIGNATURE

Acknowledgment of Handover