

LEGACY ENDOWMENT CONTRIBUTION RECEIPT

Receipt Number:

Date:

DONOR INFORMATION

Donor Name:

Address:

City, State, Zip:

Phone:

Email:

Account/ID:

CONTRIBUTION DETAILS

ENDOWMENT FUND DESIGNATION	METHOD OF PAYMENT	REFERENCE NO.	CONTRIBUTION AMOUNT

Total Amount Received (in words):

ENDOWMENT TERMS & PURPOSE

Thank you for your generous contribution to the legacy endowment. This gift is accepted subject to the terms and conditions of the designated endowment fund agreement. No goods or services were provided in exchange for this contribution other than intangible religious or charitable benefits. Please retain this receipt for your tax records.

AUTHORIZED REPRESENTATIVE SIGNATURE

DATE