NATURAL DISASTER RELIEF

Donation Receipt

Organization:

Address:

EIN/Tax ID:

Receipt No:

Date:

DONOR INFORMATION

Donor Name:

Address:

Phone:

Email:

CONTRIBUTION DETAILS

Disaster Relief Fund/Initiative:

Contribution Date:

Amount:

Contribution Type:

☐ Cash
☐ Check (No: _____)
☐ Credit Card / Online
☐ In-Kind (Describe below)

Description of In-Kind Gift (if applicable):

Estimated Value of In-Kind Gift:

Authorized Representative Signature

Representative Name & Title

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