

---

---

---

---

## RECEIPT

Receipt No. \_\_\_\_\_

Date \_\_\_\_\_

---

### DONOR INFORMATION

Donor Name

Address

City, State, Zip

Email / Phone

---

### CAPITAL CAMPAIGN CONTRIBUTION DETAILS

Campaign Name

Contribution Date	Payment Method / Reference No.	Contribution Amount

Thank you for your generous contribution to our Capital Campaign. No goods or services were provided in exchange for this contribution other than intangible religious benefits, or the sole value of the contribution consists of entirely tax-deductible charitable support. Please retain this receipt for your tax records.

\_\_\_\_\_  
Authorized Representative Signature

\_\_\_\_\_  
Printed Name & Title