SPONSORSHIP RECEIPT

Email:
Phone:
Tax ID / EIN:

Receipt Number: **Date Issued:**

Payment Date: **Payment Method:**

Reference / Check #:

SPONSOR INFORMATION

Company Name:

Contact Person:

Billing Address:

Email Address: **Phone Number:**

SPONSORSHIP & CONTRIBUTION DETAILS

Supported Initiative / Event	Sponsorship Level / Package	Amount

Total Received:

Value of Goods/Services Provided:

Tax-Deductible Contribution:

Thank you for your generous support. This document serves as official acknowledgement of your sponsorship contribution. Except as specified above, no goods or services were provided in exchange for this contribution other than intangible religious benefits, or benefits of token value. Please retain this receipt for your tax records.

Authorized Representative Signature

Name:
Title:

Date