

Tax ID / EIN:

DONATION RECEIPT

Receipt No: _____

Date: _____

DONOR INFORMATION

Donor Name:

Address:

Phone:

Email:

Contribution Description	Payment Method	Amount Received
	Cash	

Amount in Words:

Thank you for your generous contribution. 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

Printed Name & Title