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MEMORIAL FUND CONTRIBUTION RECEIPT

*In Solemn and Grateful Memory*

RECEIPT NO: \_\_\_\_\_ DATE: \_\_\_\_\_

RECEIVED FROM: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CONTRIBUTION AMOUNT: \_\_\_\_\_

PAYMENT METHOD: \_\_\_\_\_

IN MEMORY OF: \_\_\_\_\_

We gratefully acknowledge your contribution to the memorial fund designated above. Your thoughtful remembrance honors a cherished legacy and supports our ongoing mission. No goods or services were provided in exchange for this contribution other than the intangible religious or memorial benefits of honoring the deceased.

\_\_\_\_\_  
AUTHORIZED SIGNATURE

\_\_\_\_\_  
PRINTED NAME & TITLE