

# DONATION RECEIPT

Receipt Number: .....

Date: .....

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## DONOR INFORMATION

Name: .....

Address: .....

## CONTRIBUTION DETAILS

DESCRIPTION	PAYMENT METHOD	REFERENCE NO.	AMOUNT
Annual Appeal Contribution			

**Total Tax-Deductible Contribution:**

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

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

\_\_\_\_\_  
Donor Signature