

EIN/Tax ID: \_\_\_\_\_

## DONATION RECEIPT

Receipt No: \_\_\_\_\_

Date: \_\_\_\_\_

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### DONOR INFORMATION

Donor Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone/Email: \_\_\_\_\_

### CONTRIBUTION DETAILS

Capital Campaign: \_\_\_\_\_

Gift Amount (\$): \_\_\_\_\_

Value of Goods/Services: \_\_\_\_\_

Tax-Deductible Amount: \_\_\_\_\_

Method of Payment: \_\_\_\_\_

Payment Description: \_\_\_\_\_

Thank you for your generous support of our Capital Campaign. No goods or services were provided in exchange for this contribution other than intangible religious benefits, or the values of those goods and services are limited to the amount indicated above. Please retain this receipt for your tax records.

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

\_\_\_\_\_  
Date

