



DONATION RECEIPT

Receipt No.

Date

Tax ID (EIN)

DONOR INFORMATION

CONTRIBUTION METHOD

Payment Type

Reference/Check
No.

GIFT DETAILS

DESCRIPTION OF CONTRIBUTION	VALUE / AMOUNT
_____ _____	_____ _____
_____ _____	_____ _____

Total Contribution Value: _____

Tax-Deductible Amount: _____

Thank you for your generous contribution. No goods or services were provided in exchange for this contribution other than intangible religious benefits, or the benefits received consisted entirely of intangible religious benefits. Please retain this receipt for your tax records.

Authorized Representative Signature

Date