

## Donation Receipt

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

Receipt #: \_\_\_\_\_

### Non-Profit Organization Information:

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

### Donor Information:

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

### Donation Details:

Amount: \$ \_\_\_\_\_

Donation Method: \_\_\_\_\_

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

Description of Donation (if applicable):

---

---

---

### Acknowledgment Statement:

\_\_\_\_\_ acknowledges receipt of the donation described above from the donor. No goods or services were provided in exchange for this donation.

Thank you for your generous support!

Signature: \_\_\_\_\_

Representative's Name: \_\_\_\_\_

Representative's Title: \_\_\_\_\_

Organization's Name: \_\_\_\_\_