

# DONATION RECEIPT

**Your Business Name**

Address line, City, ZIP

Receipt #:

DN-0001

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

EIN: \_\_\_\_\_

**DONOR**

**Name / company**

Address, City, ZIP

Description	Amount

**Total donation**     \$ \_\_\_\_\_

*No goods or services were provided in exchange for this contribution. The organization is a 501(c)(3); your donation is tax-deductible.*