



DOING THE
MOST GOOD™

DONATION RECEIPT

Receipt No. _____

Tax ID Number (EIN): ____ - _____

Donated By: _____

Street Address: _____ City: _____

State: _____ Zip: _____

Donation Date: _____

Donation Value: \$ _____

Donation Description: _____

Representative Signature: _____

Print Name: _____

Thank you for your generosity. We appreciate your support!

