



Donation Tax Reciept

Information to be completed by donor

Name: _____

Date: _____

Address: _____

City: _____

State: _____

ZIP: _____

This receipt is the only record of your tax deductible donation

DONATION INFORMATION	DONATION AMOUNT
Total Paid	

Tax benefits for charitable contributions are available only to taxpayers who itemize deductions. To claim a deduction on taxes, please refer to IRS publication 501c3

Tax Year: _____

Tax ID: 35-2014197

Authorized By: _____

Role: _____

Board member / Committee / Other

Signature: _____