

DONATION RECEIPT

Date: _____

Nameless Ministries Inc
10925 Tailfeather Ct
Tampa, Florida
33625

Thank you _____ [Donor's Name] for your contribution of
_____ Dollars (\$ _____) in value described as:

- **Monetary Payment** made by check credit card cash other _____

- **Food** described in the itemized list in Exhibit A

- **Property** (in kind) described in the itemized list in Exhibit A

Nameless Ministries Inc is classified as a 501(c)(3) non-profit organization by the standards of the Internal Revenue Service (IRS). Therefore, the donation may be tax-deductible to the extent allowed by law.



Authorized Signature: _____
By Nicholas Michelini

Title: Vice President

Tax ID Number: 87-3743519

EXHIBIT A

Description of Donation Value

	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$