

Tax-Deductible Donation Receipt

Blank Donation Receipt Template

Organization Name: _____

EIN/Tax ID: _____

Address: _____

Phone Number: _____

Donor Name: _____

Donor Address: _____

Date of Donation: _____

Amount (or Description of Donation): _____

Donation Type: _____

Goods/Services Provided in Return: _____

Authorized Signature: _____ Date: _____

Notes:

This receipt acknowledges receipt of your tax-deductible donation. No goods or services were provided in exchange for this contribution, unless otherwise stated above.

Please keep this receipt for your records.