

Annual Donation Statement

Donor Name: _____ Organization Name: _____
Address: _____ Address: _____
Email: _____ Phone: _____

Statement Period: January 1, 20XX – December 31, 20XX

Donation Summary

Date	Description	Amount
__/__/20XX	General Fund	\$ _____
__/__/20XX	Campaign Name	\$ _____
		Total \$ _____

No goods or services were provided in exchange for your contributions unless otherwise noted above.

Thank you for your generous support!

Date Issued: _____

Authorized Signature: _____