

# Charitable Donation Statement

Date: \_\_\_\_\_

## Charity Information

Charity Name: \_\_\_\_\_  
Charity Address: \_\_\_\_\_  
Charity EIN/Registration #:  
\_\_\_\_\_

## Donor Information

Donor Name: \_\_\_\_\_  
Donor Address: \_\_\_\_\_

## Donation Details

Date of Donation: \_\_\_\_\_  
Donation Description: \_\_\_\_\_  
Donation Amount/Value: \_\_\_\_\_  
Was anything received in return?  
\_\_\_\_\_  
Details (if applicable):  
\_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

No goods or services were provided in exchange for this donation unless otherwise noted above. Please retain this statement for your records.