

# Donation Receipt Statement

Organization Name  
Address Line 1  
Address Line 2

## Donor Information

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

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

## Donation Details

Description	Amount	Date
_____	_____	_____
_____	_____	_____
Total	_____	

## Notes

\_\_\_\_\_

Authorized Signature

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