

Tax-Deductible Donation Statement

Donor Information:

Name: _____
Address: _____
City, State, ZIP: _____
Email: _____

Organization Information:

Organization Name: _____
EIN / Tax ID: _____
Address: _____
City, State, ZIP: _____

Donation Details:

Date	Description	Amount (USD)

Total Donation: \$ _____

Declaration:

No goods or services were provided in exchange for these contributions other than intangible religious benefits, if any. Please retain this statement for your tax records.

Authorized Organization Signature

Date