

Tax Receipt

Organization Name: [Your Nonprofit Name]

Address: [Organization Address]

Phone: [Organization Phone Number]

Website: [Organization Website]

Tax ID/EIN: [Organization Tax ID]

Date of Donation: [MM/DD/YYYY]

Receipt Number: [Unique Receipt Number]

Donor Name: [Donor Full Name]

Donor Address: [Donor Address]

Donation Amount: \$[Amount]

Type of Donation: [Cash / Check / Credit Card / Other]

Description (if non-cash): [Description of Goods or Services]

Declaration:

No goods or services were provided in exchange for this contribution (unless otherwise noted above).

Your donation is tax-deductible to the extent allowed by law.

Authorized Signature:

[Authorized Person's Name/Title]

[Date]

Thank you for supporting [Your Nonprofit Name]!