

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]!