

Official Receipt

Non-Profit Organization Name
Address ¤ Phone ¤ Email

Receipt No.:

Date:

Received From:

Address:

Description	Amount (USD)
Total	

Payment Method:

☐

Cash

☐

Check

☐

Online Transfer

☐

Other

Purpose of Donation:

Authorized Signature:

This official receipt acknowledges that the donation will be used to support the organization's charitable activities.

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

Thank you for your support!