

DONATION RECEIPT

[Organization Name]
[Street Address]
[City, State, Zip]

Invoice #: [0000]
Date: [MM/DD/YYYY]
RECURRING MONTHLY

Donor Information:

[Donor Name]
[Donor Address]
[Email Address]

Payment Method:

[Card Type ending in XXXX]
Next Draft Date: [MM/DD/YYYY]

Description	Frequency	Amount
Monthly Giving Program: [Campaign Name]	Monthly	\$0.00
Processing Fee Coverage (Optional)	Monthly	\$0.00

Subtotal: \$0.00

Total Monthly Gift: \$0.00

Thank you for your continued support. This is an automated notification of your recurring monthly commitment.

[Organization Name] is a 501(c)(3) non-profit organization. No goods or services were provided in exchange for this contribution. Tax ID: [00-0000000]