

MONTHLY CONTRIBUTION STATEMENT

[Organization Name]
[Address Line 1]
[City, State, Zip]

Statement ID: [000000]
Date: [Date]
Period: [Month, Year]

CONTRIBUTOR

[Donor Name]
[Donor Address]
[City, State, Zip]
[Email Address]

RECURRING TERMS

Frequency: Monthly
Payment Method: [Method]
Next Scheduled Date: [Date]

Description	Designation	Amount
Monthly Recurring Contribution	[General Fund]	\$0.00
Special Project Offering	[Building Fund]	\$0.00

Subtotal: \$0.00
Processing Fee: \$0.00
Total Contribution: \$0.00

Thank you for your continued support. [Organization Name] is a registered [Tax Status]. No goods or services were provided in exchange for this contribution, other than intangible religious benefits.

Tax ID: [00-0000000]