CHURCH NAME

123 Church Street
City, State, Zip Code
Phone: (555) 000-0000
Email: office@church.org

DONATION INVOICE

Date: _____
Invoice #: _____

DONOR INFORMATION

Name: _____
Address: _____
City, State: _____
Email: _____

PROJECT DETAILS

Building Fund Project
Phase: _____
Expected Completion: _____

Description / Designation	Amount
Building Fund General Donation	$ _____
Memorial / Special Designation: _____	$ _____
Brick / Naming Opportunity	$ _____

Description / Designation	Amount
Other: _____	$ _____

Total Amount: $ _____

Church Name is a 501(c)(3) nonprofit organization. All donations are tax-deductible to the extent allowed by law. No goods or services were provided in exchange for this contribution.

Tax ID / EIN: 00-0000000

Thank you for your faithful support of our building vision.