

# DONATION INVOICE

Alumni Association  
Institution Name

INVOICE NUMBER  
#000000

DATE  
MM/DD/YYYY

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## DONOR INFORMATION

Name:

Class Year:

Email:

## PAYMENT STATUS

Status: [ Pending / Paid ]

Payment Method:

Transaction ID:

Description	Amount
Alumni Class Gift Contribution	\$ 0.00
Designated Fund: (e.g., Scholarship, Athletics)	\$ 0.00
<b>Total Donation</b>	<b>\$ 0.00</b>

## NOTES / RECOGNITION NAME

Thank you for your generous support of your alma mater.

This document serves as a formal request/record for your tax-deductible contribution.

Tax ID / EIN: 00-0000000