

DONATION INVOICE

[Institution/Organization Name]

[Address Line 1]

[City, State, Zip]

Invoice #: _____

Date: _____

DONOR INFORMATION

[Full Name]

[Class Year]

[Address]

[Email/Phone]

EVENT DETAILS

[Reunion Year/Name]

[Committee Lead]

[Tax ID Number]

Description	Category	Amount
Reunion General Fund Donation	Contribution	\$ 0.00
Scholarship Endowment Support	Gift	\$ 0.00
Event Sponsorship / Amenities	Sponsorship	\$ 0.00
Subtotal: \$ 0.00		

Total Donation: \$ 0.00

Payment Instructions:

Please make checks payable to *[Organization Name]*.

For wire transfers or online payments, please visit: *[Website URL]*

Thank you for your generous support of your alma mater.

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