DONATION INVOICE

Service Animal Training Program

Invoice #: _____

Date: _____

Organization Information:
[Organization Name]
[Street Address]
[City, State, Zip]
[Tax ID / EIN]
Donor Information:
[Name/Company]
[Street Address]
[City, State, Zip]
[Phone/Email]

Description of Sponsorship / Training Support	Amount
Service Dog Puppy Raising/Sponsorship	$ _____
Advanced Task Training Sessions	$ _____
Veterinary & Equipment Fund	$ _____
General Program Donation	$ _____

Total Contribution: $ _____

Payment Method:

[ ] Check (Payable to: _____)
[ ] Credit Card / Online Portal
[ ] Wire Transfer / ACH

Thank you for your generous support in providing life-changing service animals.

No goods or services were provided in exchange for this contribution. Please retain this for your tax records.