

WILDLIFE RESCUE CENTER

123 Nature Reserve Road
Wildwood, ST 12345
Tax ID: 00-0000000

INVOICE / RECEIPT

No: _____
Date: _____

DONOR INFORMATION:

Name: _____
Address: _____
Email: _____

Description	Quantity	Unit Value	Total
General Donation / Animal Care			\$
Species Sponsorship: _____			\$
In-Kind Goods / Supplies			\$
Subtotal: \$			_____
Processing Fees: \$			_____
Grand Total: \$			_____

OFFICIAL ACKNOWLEDGMENT:

No goods or services were provided in exchange for this contribution. This donation is tax-deductible to the full extent of the law.

Authorized Signature: _____

Thank you for supporting wildlife conservation and rehabilitation.

www.wildliferescue.example