

COMMUNITY ARTS CENTER

123 Creative Way
Arts District, ST 12345
contact@communityarts.org

DONATION INVOICE

Invoice #: _____

Date: _____

Donor Information:

Name: _____

Address: _____

Phone: _____

Payment Method:

Cash

Check (No. _____)

Credit Card / Online

Description / Purpose of Donation	Amount
General Fund / Operations	\$ _____
Youth Scholarship Program	\$ _____
Exhibition & Gallery Support	\$ _____
Other: _____	\$ _____
TOTAL DONATION	\$ _____

Authorized Signature:

The Community Arts Center is a 501(c)(3) non-profit organization.
Your contribution is tax-deductible to the extent allowed by law.
Thank you for supporting the arts!