

DONATION INVOICE

[Corporate Community Center Name]

[Street Address]

[City, State, Zip Code]

[Tax ID / EIN]

Invoice #: _____

Date: _____

Donor Information:

Payment Method:

Check (# _____)

Credit Card

Wire Transfer

Cash

Description / Purpose of Donation	Amount
_____	\$ _____
_____	\$ _____
_____	\$ _____

Description / Purpose of Donation

Amount

Total Contribution: \$ _____

Notes:

Authorized Signature

Date signed

Thank you for your generous support of the Corporate Community Center.

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