

# COMMUNITY CENTER NAME

123 Community Lane

City, State, Zip Code

Phone: (555) 000-0000

Email: contact@communitycenter.org

Tax ID/EIN: 00-0000000

## DONATION RECEIPT

Receipt #: \_\_\_\_\_

Date: \_\_\_\_\_

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### DONOR INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Description of Donation / Program Support	Amount/Value
_____	_____
_____	_____
_____	_____
_____	_____

Subtotal: \$0.00

Total Contribution: \$0.00

***Acknowledgment:*** *No goods or services were provided by the Community Center in return for the contribution indicated above, or the value of goods and services provided was limited to token items or intangible religious benefits.*

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Thank you for your generous support of our community programs.

The [Community Center Name] is a 501(c)(3) non-profit organization.