

**DONATION ACKNOWLEDGEMENT**

[Senior Center Name]

[Street Address]

[City, State, Zip]

[Tax ID / EIN]

Date  
Acknowledgement No.

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Donor Information

Phone/Email

Description of Donation	Estimated Value/Amount
<b>Total Contribution</b>	

Contribution Type

Cash/Check    Goods/In-Kind    Services    Other: \_\_\_\_\_

*No goods or services were provided in exchange for this contribution. [Senior Center Name] is a 501(c)(3) non-profit organization. Your contribution is tax-deductible to the extent allowed by law.*

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Authorized Signature

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Thank you for supporting our senior community.