

[Historical Society Name]
[Street Address]
[City, State, Zip Code]
[Phone Number] | [Email/Website]
EIN: [00-0000000]

DONATION INVOICE

Date: _____
Invoice #: _____

DONOR INFORMATION

[Donor Name / Organization]
[Street Address]
[City, State, Zip Code]
[Email/Phone]

PAYMENT STATUS

Status: Pending Paid
Payment Method: _____
Transaction ID: _____

Description of Donation	Quantity	Estimated Value / Amount
[Item Name or Monetary Contribution]	[1]	\$

Total Contribution: \$ _____

Official Tax Receipt Information:

[Historical Society Name] is a registered 501(c)(3) non-profit organization. Your contribution is tax-deductible to the extent allowed by law. No goods or services were provided in exchange for this contribution unless otherwise noted. Please retain this invoice for your tax records.

Thank you for your generous support in preserving our local history.