[Organization Name]

[Street Address]
[City, State, Zip Code]
[Phone Number] | [Email/Website]

Federal EIN: [XX-XXXXXXX]

DONATION RECEIPT

Date: [MM/DD/YYYY]
Receipt #: [0000]

DONOR INFORMATION

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

Description / Purpose	Donation Type	Amount/Value
[Youth Sports Program/Team Sponsorship]	[Cash/Check/In-Kind]	$0.00

Total Contribution: $0.00

Tax-Deductible Status:

This organization is a qualified 501(c)(3) non-profit organization. No goods or services were provided in exchange for this contribution. Please retain this receipt for your tax records.

Thank you for supporting youth athletics in our community!