DONATION INVOICE

[Squad Name] Cheerleading
[Street Address]
[City, State, Zip]

DONOR INFORMATION

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

INVOICE DETAILS

Invoice #: [00000]
Date: [Date]
Tax ID: [XX-XXXXXXX]

Description	Quantity	Amount
Squad Sponsorship / Donation	1	$0.00
[Additional Item/Recognition Level]	-	$0.00

Subtotal: $0.00
Total Donation: $0.00

NOTES & INSTRUCTIONS

Please make checks payable to: **[Squad or Organization Name]**

Your contribution is tax-deductible to the extent allowed by law. No goods or services were provided in exchange for this contribution.

Thank you for supporting our athletes and the youth cheerleading program!