[Organization Name]
[Street Address]
[City, State, Zip Code]
[Tax ID / EIN Number]

INVOICE

Date: [Date]
Invoice #: [00001]

Bill To (Foundation):
[Corporate Foundation Name]
[Contact Name/Department]
[Address]
[City, State, Zip]
Grant Reference:
Grant ID: [Reference Number]
Cycle: [Grant Year/Period]

Description of Giving/Grant Purpose	Amount
[Program Name / General Operating Support]	$0.00
[Specific Project or Event Sponsorship]	$0.00
Total Requested:	**$0.00**

Payment Instructions:
Make all checks payable to: **[Organization Name]**

Electronic Transfer (ACH):
Bank Name: [Bank Name]
Routing #: [Routing Number]
Account #: [Account Number]

Thank you for your generous support of our mission. [Organization Name] is a 501(c)(3) nonprofit organization. No goods or services were provided in exchange for this contribution.