

# Donation Receipt

**Charity / Organization Name**

**Lic. No. (If applicable)**

Your Address 1

Your City, State ZIP

Your Name (Company Name)

Contact number, Em

Mobile#

**Date:** August 4, 2016

**Receipt#:** INV1052

**Donor:** cust l1 \_\_\_\_\_

Description

Authorized Signature

Total Amount Received	
Received By	

THANK you for your generosity