



Donation Receipt

ACKNOWLEDGMENT AND CONTRIBUTED GOODS RECEIPT
RETAIN FOR TAX PURPOSES

Donation Date: _____

CONTACT INFORMATION

Full Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

DONATION INFORMATION

<u>Description</u>	<u># of Items Donated</u>	<u>Donor Note for Tax Records</u>
<input type="checkbox"/> Diapers	_____	_____
<input type="checkbox"/> Period Supplies	_____	_____
<input type="checkbox"/> Adult Supplies	_____	_____
<input type="checkbox"/> Other	_____	_____

Tax Year: _____ Receipt Fair Market Value*: _____ Tax ID: 27-3434770

THANK YOU FOR YOUR DONATION!

SIGNED: Ann Marie Mathis

*The fair market values determined are the responsibility of the donor at the time of the donation. No goods or services were provided for this donation.

Questions? Send an email to info@keepingfamiliescovered.org or contact our office at 224-637-1644.