



Donation Receipt

Date: _____

THANK YOU! Your donation will empower families in need and victims of domestic violence with safety, stability, and a path to self-sufficiency.

Name: _____

Address: _____ City: _____ State _____ ZIP: _____

Phone: () _____ E-mail: _____

Item(s) Donated: _____

*Donor Estimated Value: \$ _____

***CRC is legally not able to estimate the value of your donation for you. Please keep this receipt for your records, and consult your tax preparer or the IRS Website for valuation guides.**

*Community Resource Center is a 501(c)(3) charitable tax-exempt organization.
Tax Identification Number: 95-3497926. No goods or services were given in exchange for this contribution.*

OFFICE USE ONLY

Notes: _____ Department: _____

WHITE = CRC Office Pink = Donor