

Donation Tax Receipt

Please complete this form and retain with your tax records.

Date: _____ Donation from: ☐ Individual ☐ Organization/Company
Organization/Company Name: _____
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ E-mail: _____

Donation Information

Value of Donation

Check all applicable boxes and provide a brief description.

<input type="checkbox"/> Gift cards: _____	Rs. _____
<input type="checkbox"/> Tickets or Passes: _____	Rs. _____
<input type="checkbox"/> Gift Items: _____	
_____	Rs. _____
<input type="checkbox"/> Bank: _____	Rs. _____

Attach copies of receipts, letters or other
relevant information.

Total: Rs. _____

Thank you for your contribution!

For your accounting purposes: The Home did not provide any goods or services to you in exchange for this donation. If you have any questions, please call 8544074574 or e-mail saanvifoundation23@gmail.com