

# Jacob's Ladder Development Center, Inc. 501(c)(3) ORGANIZATION DONATION RECEIPT

Date: \_\_\_\_\_

Name of Non-Profit Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

EIN: \_\_\_\_\_

## Donor Information

Donor's Name: \_\_\_\_\_

Donor's Address: \_\_\_\_\_

Donor's Phone Number \_\_\_\_\_

Donor's Email  
Address \_\_\_\_\_  
\_\_\_\_\_

## Donation Information

Thank you for your donation with a value of \_\_\_\_\_ Dollars  
(\$ \_\_\_\_\_), made to the above-mentioned 501(c)(3) Non-Profit Organization. Donation  
Description: \_\_\_\_\_ I, the  
undersigned representative, declare (or certify, verify, or state) under penalty of perjury under  
the laws of the United States of America that there were no goods or services provided as part  
of this donation. Furthermore, as of the date of this receipt the above-mentioned organization is  
a current and valid 501(c)(3) non-profit organization in accordance with the standards and  
regulations of the Internal Revenue Service (IRS).

Representative's Signature \_\_\_\_\_

Representative's Name \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_