



everychild.one voice.

## DONATION RECEIPT

Date \_\_\_\_\_

Name \_\_\_\_\_

Cash contribution \$ \_\_\_\_\_

In-kind non-cash items exceeding \$250 in value (description of items):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*“Quid Pro Quo”* contributions (Contributions that are made partly as a contribution and partly in payment for goods and services received, for example, a ticket price that is higher than its normal value). For Quid Pro Quo contributions of more than \$75, list item(s) and total amount paid for each.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In consideration of their donation, donor received (e.g., value of meal):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The California State PTA is a tax-exempt nonprofit organization as described in Section 501(c)(3) of the Internal Revenue Code. This exemption applies to all the California State PTA's constituent organizations.

Authorized by \_\_\_\_\_

IRS EIN \_\_\_\_\_

**PLEASE RETAIN FOR YOUR TAX RECORDS  
THANK YOU FOR YOUR SUPPORT**