

DONATION RECEIPT

The Homeless Charity

Donated By: _____ Received By: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Date of Donation: _____ Donation Value: _____

Description of Donation:

Thank you, for your generous support. Together we can fight homelessness!

The Homeless Charity PO Box 5258 Fairlawn, Ohio 44333

Thehomelesscharity.org

Lerryn@thehomelesscharity.org

Tax ID: 81-3745940

The donor has received no goods or services.