



MONK STRONG MEMORIAL

501c3 Corporation

Donation Submission Receipt

Please complete the following information to ensure proper recognition of your generous donation. You may opt-out and remain anonymous.

Donor's Name/Organization: _____

Primary Point of Contact: Name: _____ Phone #: _____

Mailing Address: _____ City/State: _____ Zip Code: _____

Does the donor request to remain anonymous? Yes or No

Will the donor require a receipt for tax purposes? Yes or No

Thank you for your donation with a value of _____ Dollars (\$ _____), made to the above-mentioned 501(c)(3) Non-Profit Organization.

Donor Level	Minimum Donation	Name on T-Shirt	Name on Signs @ Run	Name on Banner	Name on Social Media
.556	\$100	✓			
.762	\$500	✓	✓		
50 cal	\$1,000	✓	✓	✓	✓

The donation is made in the manner of:

- Cash: _____
- Debit/Credit Card: _____
- Check: _____
- Bank Wire: _____

Donation Description (nonspecific, fund-raising assistance, etc.): _____

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).

The Office of the Secretary of State of Texas has authorized Monk Strong Memorial as a Domestic Nonprofit Corporation File Number: 804906114

Monk Strong Memorial Representative's Signature _____

Monk Strong Memorial Representative's Name _____

Title: _____ Date: _____