



# 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: \_\_\_\_\_ Email: \_\_\_\_\_

## Donation Information

## Value of Donation

Check all applicable boxes and provide a brief description:

Food: \_\_\_\_\_ Value: \_\_\_\_\_

Supplies: \_\_\_\_\_ Value: \_\_\_\_\_

Other: \_\_\_\_\_ Value: \_\_\_\_\_

\_\_\_\_\_

Attach copies of receipts, letters or other relevant information.

## Thank You For Your Contribution!

For your accounting purposes: Integrated Family Community Services (IFCS) did not provide any goods or services to you in exchange for this donation. If you have any questions, please call 303-789-0501 or e-mail ifcs@ifcs.org. Our Federal Tax ID is 84-0579740.

To claim a charitable deduction for your donations, you must assign a value to them. By law, IFCS cannot tell you the value. As a taxpayer, you will need this form as proof of your donation for tax deduction purposes. To be valid, this receipt must be completed at the time of donation. Validation of value for items greater than \$500 may be needed by you in order to substantiate your deduction to the IRS.