**Name of organization**

*Canadian Address*

*Charity BN/Registration number*

***Official donation receipt for income tax purposes***

**Receipt #:** 1234567 (Unique serial number)

**Receipt issued:** DD/MM/YYYY

**Location:** (City/area)

**Donated by:** (Enter first and last name)

**Address:** (Enter address)

**Date of donation:** DD/MM/YYYY (Enter date or year)

**Amount donated:** (Enter amount in words). $: (Numbers)

**Authorized signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name of authorised signatory)

(Designation)