



Camano Island Quilters Guild
501(c)(3) ORGANIZATION DONATION RECEIPT

Date: _____

Name of Non-Profit Organization: **Camano Island Quilters Guild**

Mailing Address: PO Box 2592, Stanwood Wa. 98292

EIN: ___26-3237757_____ (Find on the [IRS Website](#))

Donor Information

Donor's Name: _____

Donor's Address: _____

Donation Information

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

Donation Description:



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).

Representative's Signature

Representative's Name _____

CIQ Committee: _____ Date: _____

Detach and return to CIQ Treasurer

Date: _____

Donation received by: _____

Donation Description: _____

Value of goods _____ or Dollar Amt: \$ _____