

Order of The Mother Star



Home of The House of Bread

Donation Receipt

Date: _____ Receipt No. _____

Donated By: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Amount Received By Charity: A) \$ _____

Value of Advantage: B) \$ _____

Eligible Amount of Gift for Tax Purposes (A-B) \$ _____

Description of Donation:

Authorized Signature: _____

Thank You for Your Generosity. We Appreciate Your Support!