

DONATION RECEIPT

Thank you for your donation. You should retain this receipt for tax purposes.

CommunityAid has not furnished goods or services to the donor in exchange for this contribution.

DATE _____ LOCATION _____ REP. Levy

NAME OF DONOR _____

ADDRESS _____

BAGS	BOXES	PIECES	DESCRIPTION
			CLOTHING
			FURNITURE
			HOUSEHOLD
			MISCELLANEOUS
ESTIMATED VALUE OF DONATIONS (assigned by donor) \$			

Note: Due to the record keeping and reporting requirements imposed by the Internal Revenue Service, CommunityAid requests all donors who will require us to execute a Form 8283 for contributions valued over \$5,000 to present Form 8283 for execution at the time of donation. CommunityAid will not execute such forms at any time thereafter. We are required to report to the IRS any time a donation exceeds a value of \$5,000.



Corporate Office
10 Skyport Road
Mechanicsburg, PA 17050
EIN 26-4376213

COMMENT CARD

Tell us about your experience. We value and welcome your opinions and comments.

DATE _____ LOCATION _____

NAME _____

ADDRESS _____

EMAIL _____

Please rate today's donation experience:
(1 being poor and 5 being great) 1 2 3 4 5

COMMENTS: _____

Please detach and return to our store.
To leave feedback online, visit
communityaid.net/contact **OR**
scan QR code.

