

FUNDRAISING RECEIPT



LETR DEPARTMENT INFORMATION

Contact Name	
LETR Department	
Department ID #	

DONATION INFORMATION

Method of Payment: Cash Check Credit Card Venmo Square

Name					
Company/org					
Address					
City		State		Zip	
Phone		Email			
OFFICE USE ONLY:	DONOR CONSTITUENT ID #				

Event	Amount	Notes (Donor and ID#)	
Adopt-a-Mile	\$		
Coin Drop	\$		
Cop-on-Top	\$		
General Donation	\$		
Merchandise	\$		
Paper Torch	\$		
Runner Pledges	\$		
Tip-a-Cop	\$		
Other Event	\$	Event Name	
		Participant Name	
		Participant ID #	
		Team Name	

TOTAL

Cash	\$
Check	\$
Credit Card	\$
Venmo	\$
Square	\$
GRAND TOTAL	\$

CODING

Campaign Year	
Account Number	
Fund/Dept	# 014 – Torch Run

LETR Representative	SOCT Staff Verifying Deposit	SOCT Staff Depositor

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[illegible]

NOTES: