

Donation Acknowledgment and Receipt Including a Statement of Donor's Intent

This form is to be used to acknowledge and provide a receipt for donations other than those involving the Border Security & Immigration Legal Defense Fund.

This form is to be co	mple	ted by the Dono	or.							
Donor Name (Individual or Organization)								Date		
Street Address										
City				State				Zip		
Donation Information	า									
Description of non-cash	donat	ion								
Description of goods or	service	es provided to dono	or in exchange for the co	ontributio	n*:					
Estimated value of goods or services provided Amount of donation										
to donor in exchange for the contribution* in cash										
*Includes tangible items such as tickets to events, gift cards, etc., as well as intangible items such as services like ca								ashing,	etc.	
Donation Intent										
It is the intent of the Don and/or the Receiving Ag restrictions, terms or cor	ency t	o determine the bes	ised for the purpose set st use of this Donation c	forth imi consister	mediate nt with tl	ly below. I authorize the his intent. The Donor pla	e State o	of Arizor other	าล	
Donor Acknowledgn	ont									
_		ations other than as	ach may be cald ar other	nuico dic	nonad .	of and that their process	to than	uood in	0	
Donor acknowledges that manner consistent, to th	e exte	nt practicable and o	conforming to law, with t	he Dono	r's inte	nt. Donations are accep	ted with	n the		
understanding that they that they have been free										
agencies, divisions or de	partm	ents or its agents o								
a manner consistent with	n Dono	or's intent.					_			
Donor's Signature							Date	•		
Title (Donor/Agent/Executor/Officer)										
Please ask for and retain potential deductibility of				or your r	ecords	. Please consult your tax	k adviso	or as to t	he	
,			Thank You for Your	r Suppo	rt!					
		Section B	elow for Use by the	State o	f Arizo	ona Only				
Receiving Agency										
Receiving Employee Name					Title					
Receiving Employee					EIN		Date			
Signature										

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