

THE SOCIETY FOR CREATIVE ANACHRONISM, INC.

ACKNOWLEDGEMENT OF DONATION & RECEIPT

Branch: _____

Date of donation: _____

Donor Name: _____

Street Address: _____

City:	State or Province:	Zip or Postal Code:
_____	_____	_____

Telephone: () _____

Item Description and Condition:

Total Fair Market Value of item(s) or cash amount donated: _____

Value of any goods, services, or benefits received by Donor in consideration for this contribution: _____

Branch Seneschal:	Signature:
_____	_____

Street Address: _____

City:	State or Province:	Zip or Postal Code:
_____	_____	_____

Telephone: () _____

The donor is responsible for providing Fair Market Values for non-cash donations.
The SCA provides the value of goods, services, or benefits received in return for the donation.

Make a copy for the SCA Exchequer's files. The donor keeps the original.