

DONATION RECEIPT

Date: _____

Adam Grigas Memorial Scholarship Fund
7248 Bentham Cir NW
North Canton, Ohio
44720

Thank you _____ [Donor's Name] for your contribution of

_____ Dollars (\$ _____) in value described as:

- **Monetary Payment** made by check credit card cash other _____

- **Property** (in kind) described in the itemized list in Exhibit A

Adam Grigas Memorial Scholarship Fund is classified as a 501(c)(3) non-profit organization by the standards of the Internal Revenue Service (IRS). Therefore, the donation may be tax-deductible to the extent allowed by law.

Authorized Signature: _____



By katie Batdorff

Title: Director

Tax ID Number: 46-5101455

\$