**501(c)(3) ORGANIZATION DONATION RECEIPT**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Non-Profit Organization: Prevail Inc.

Mailing Address: 1100 S. 9th Street, Suite 100 Noblesville, IN 46060

Telephone: 317-773-6942. 1100 S. 9th Street, Suite 100, Noblesville, IN

EIN: 35-1681864 (Find on the [IRS Website](https://apps.irs.gov/app/eos/))

**Donor Information**

Donor’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**­**Donor’s Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Donation Information­­­**

Thank you for your donation with a value of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dollars ($\_\_\_\_\_\_\_\_\_\_\_\_\_), (Value can be determined at: <https://www.bankmycell.com/whats-my-phone-worth>) made to the above-mentioned 501(c)(3) Non-Profit Organization.

Donation Description: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, the undersigned representative, declare (or certify, verify, or state) under penalty of perjury under the laws of the United States of America that there were no goods or services provided as part of this donation. Furthermore, as of the date of this receipt the above-mentioned organization is a current and valid 501(c)(3) non-profit organization in accordance with the standards and regulations of the Internal Revenue Service (IRS).

**Representative’s Signature**: K.Dunn

Representative’s Name: Katherine Dunn Date: January 16, 2022

Title: Chairperson/ Founder Voice to Victims (https://voice2victims.weebly.com)