

**Thank you for your contribution.**

NAME: JUFI SERVICE COMMITTEE OF BOSTON  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
PHONE: (day) \_\_\_\_\_ (eve) \_\_\_\_\_

For tax-deduction purposes, it is necessary for you to describe the items you are donating in order to substantiate their value. No products, goods or services were provided by Rosie's Place in exchange for your gift. We gratefully acknowledge receipt of the following items:

BREAD DONATION  
\_\_\_\_\_  
\_\_\_\_\_

Received by: [Signature] Date: 7-2-15  
Rosie's Place, 889 Harrison Avenue, Boston, MA 02118

NOTE: For gifts valued at \$500 to \$4,999, it is necessary for you to complete and properly file the IRS Form 8283. For gifts valued at \$5,000 or more, it is also necessary for you to obtain a qualified appraisal. Please contact the Fiscal Office for assistance.

