



On behalf of mothers and babies everywhere, thank you for supporting breastfeeding and La Leche League. Your generous donation allows us to improve breastfeeding support and education programs in our community and around the world. This receipt certifies that no goods or services were provided the donor in exchange for contributions.

_____ of
(name)

_____ (address) _____ (city, state, zip)

has donated _____ to La Leche League.
(value declared by donor OR \$ amount of cash donation)

La Leche League International is a not-for-profit organization. Donations are tax deductible less the value of any goods provided by LLL.

_____ La Leche League Leader

_____ Date



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