



IN THE NAME OF ALLAH, THE BENEFICENT, THE MERCIFUL
ISLAMIC ASSOCIATION OF LONG ISLAND

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www.seldenmasjid.org

ZAKAT (CHARITY) DONATION REQUEST FORM

The President & Zakat Committee
Islamic Association of Long Island
Selden, NY 11784

Assalamu Alaykum: I hereby apply for the Zakat (charity) donation from the Islamic Association of Long Island. I solemnly declare that I do qualify to receive the Zakat (charity) donation as per Islamic guidelines. Please note IALI will report this donation and issue a 1099 form at the end of year.

Are you a legal resident of USA? Yes _____ No _____.

Signature: _____ Date: _____.

Name: _____ Social Security No. _____

Spouse: _____ Social Security No. _____.

Address: _____ Phone Home/Work: _____.

_____ Email: _____.

RECOMMENDED BY / REFERENCES:

NAME

ADDRESS

1. _____.

2. _____.

Please Do Not Write Below

Zakat Amount Approved: _____ Approved By: _____

Remarks: _____

Disapproved By/Reason: _____.