

**REASON FOR AID REQUEST**

Rent: Name of Apartment Complex \_\_\_\_\_

Manager's Name \_\_\_\_\_ Manager's office telephone number \_\_\_\_\_

Is rent due or late? \_\_\_\_\_ Amount \$ \_\_\_\_\_

Bill 1: Name of Company \_\_\_\_\_ Acct. # \_\_\_\_\_

Amount \$ \_\_\_\_\_

Bill 2: Name of Company \_\_\_\_\_ Acct. # \_\_\_\_\_

Amount \$ \_\_\_\_\_

Bill 3: Name of Company \_\_\_\_\_ Acct. # \_\_\_\_\_

Amount \$ \_\_\_\_\_

Other: (If your request is for something specific please list in detail in this space what your request is.)

Please make sure you have provided the following information:

- Current and correct address where required.
- Present your picture ID for photo copying
- Copies of utility bills, Evictions, Lease Agreements, telephone bills, or relevant document
- Social Security Number or ID number
- Two references that are aware of your situation

I have received, read and understand the policies and procedures governing the zakat process. I give GMM and its representative's permission to verify my information with other local mosques and to verify any information pertaining to this zakat application or my situation with any reference I list.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**For Office Use Only**

- Verified Current Address
- Obtained Copy of DL or ID card
- Copies of utility bills if required
- Application received by information

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Approved [ ] Denied [ ] Amount \_\_\_\_\_

Reason For Denial \_\_\_\_\_