



# AAFIYAA

Charity Clinics

HEALTHCARE & COMPASSION

## Official Donation Receipt

Tax Deductible Charitable Donation

**Receipt Number:**

**AC-20250908-124714**

**Date Issued:**

8 September 2025 at 01:45 pm

### Donation Details

Total Donation Amount

**\$5.00**

DONATION TYPE

**Sadqah**

FREQUENCY

**One-time donation**

PAYMENT METHOD

**stripe**

TRANSACTION DATE

**8 September 2025 at 01:35  
pm**

DONOR NAME

**Test Billing User**

EMAIL ADDRESS

**billing@test.com**

DESTINATION PROJECT

**Clinic Operations**

### **Tax Deduction Information**

This receipt confirms your charitable donation to Aafiya Charity Clinics. Your contribution is tax-deductible to the extent allowed by law. Please consult with your tax advisor regarding the deductibility of your charitable contributions. Keep this receipt for your tax records.

### **Thank You for Your Generosity!**

Your donation helps us provide essential healthcare services to communities in need around the world.

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**Aafiya Charity Clinics**

Email: [info@aafiya.com](mailto:info@aafiya.com) | Website: [www.aafiya.com](http://www.aafiya.com)

This is an official receipt for tax purposes. Please retain for your records.