

BLESSED RAMADHAN DAILY COMMUNITY IFTAAR PROGRAM 1441/2020



برنامج تفتير الصائمين \$300.00/day Cost

عن زيد بن خالد الجهني، رضي الله عنه عن النبي صلى الله عليه وسلم قال: "من فطر صائماً، كان له مثل أجره غير أنه لا ينقص من أجر الصائم شيء" (رواه الترمذي وقال: حديث حسن صحيح).

"He who provides a fasting person food with which to break his fast, will earn the same reward as the one who was fasting, without diminishing in any way the reward of the latter"

Choose the day/s and text it (870) 275-5535 with your name and send a check or drop the money at the Masjid, May Allaah accept it from you.

FRIDAY	SATURDAY	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY
1st of Ramadan	2nd	3rd	4th	5th	6th	7th
Name: Dr. Akhtar Phone: _____ Adminstration only <input type="checkbox"/>	Name: Sister Sec Phone: _____ Adminstration only <input type="checkbox"/>	Name: Feroz Phone: _____ Adminstration only <input type="checkbox"/>	Name: Nesar Phone: _____ Adminstration only <input type="checkbox"/>	Name: Aarif Phone: _____ Adminstration only <input type="checkbox"/>	Name: Dr. Zahid Phone: _____ Adminstration only <input type="checkbox"/>	Name: Dr. Zobaer Phone: _____ Adminstration only <input type="checkbox"/>
8th	9th	10th	11th	12th	13th	14th
Name: _____ Phone: _____ Admin use only <input type="checkbox"/>	Name: _____ Phone: _____ Admin use only <input type="checkbox"/>	Name: _____ Phone: _____ Admin use only <input type="checkbox"/>	Name: _____ Phone: _____ Admin use only <input type="checkbox"/>	Name: _____ Phone: _____ Admin use only <input type="checkbox"/>	Name: _____ Phone: _____ Admin use only <input type="checkbox"/>	Name: _____ Phone: _____ Admin use only <input type="checkbox"/>
15th	16th	17th	18th	19th	last ten/20th	21st
Name: _____ Phone: _____ Admin use only <input type="checkbox"/>	Name: _____ PP Admin use only <input type="checkbox"/>	Name: _____ Phone: _____ Admin use only <input type="checkbox"/>	Name: _____ Phone: _____ Admin use only <input type="checkbox"/>	Name: _____ Phone: _____ Admin use only <input type="checkbox"/>	Name: _____ Phone: _____ Admin use only <input type="checkbox"/>	Name: _____ Phone: _____ Admin use only <input type="checkbox"/>
22nd	23rd	24th	25th	26th	27th	28th
Name: _____ Phone: _____ Admin only <input type="checkbox"/>	Name: Hashim A Phone: _____ Admin only <input type="checkbox"/>	Name: _____ Phone: _____ Admin only <input type="checkbox"/>	Name: _____ Phone: _____ Admin only <input type="checkbox"/>	Name: _____ Phone: _____ Admin only <input type="checkbox"/>	Name: _____ Phone: _____ Admin only <input type="checkbox"/>	Name: _____ Phone: _____ Admin only <input type="checkbox"/>
29th	30th					
Name: _____ Phone: _____ Admin use only <input type="checkbox"/>	Name: _____ Phone: _____ Admin use only <input type="checkbox"/>					