



## RELEASE OF FUNDS ACKNOWLEDGEMENT

(Claim Membership - Medical)

Date: 06.09.2024

Dear Claim Member CM0011,

We trust this letter finds you in good health.

On behalf of the Support with Honor Foundation (SWHF), we extend heartfelt appreciation for your active participation in our mission.

This correspondence formally confirms the disbursement of funds to you as a Claim Member for your Medical, in accordance with the foundation's established guidelines. Following the successful completion of the stipulated 12-months timeframe, the funds have been released to support your needs as medical aid.

We acknowledge the significance of this financial support and trust that it will positively contribute to your intended purpose. By accepting these funds, you affirm the fulfillment of SWHF's commitment, with no further obligations to either party. Now, you are at liberty to utilize the funds as per your requirements as no-refund, but your SWHF ID will be revoked as called "claim given" without further considerations.

Claim Membership Information	
Membership ID	CM0011
Group Family	Family Z
CNIC no.	35401-6174945-7
Address	Muridke, Punjab, Pakistan
Contact no.	0348 438 6660
Registration Date	March, 2023
Total Completed Months	16

Breakdown of the provided support in cash form as followed		
Detail	Amount	Remarks
Total Requested Support	55,240 PKR	Asked by the claim member as per his/her need
Current Possible Support by SWHF	-	Maximum support currently SWHF can provide
Possible Support after FundRaising Campaign	0	Any possible collection conducted for this particular requirement
Any Possible Deduction	0	which was not given since the registration date
Reference Ledger Sheet	July 2024	A spreadsheet used to make final calculations
Total Given Claims	1	Based on available funds
SWHF Formula	$16 \times 100 + (55,240 \times 1) + 0 - 0 = 55,240$	
Total Supported Amount	55,240 PKR	Closing Account with Amount

We deeply appreciate your trust and commitment to creating a positive impact on your life through our collaboration. Should you have any queries or require assistance, please do not hesitate to contact us at the provided SWHF contact details. Thank you for your dedication, and we extend our heartfelt intentions for your intended medical needs. May God protect you and your family with full of blessings!

With gratitude,

Administration Office  
Support with Honor Foundation



Claim receiver acceptance

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