



# 18A Certificate /Invoice

# Cert/Inv no. 000050

## THE GIFT OF SIGHT TRUST

130 Edward Street  
Cape Town Western Cape 7550  
South Africa  
0219100300  
ceo@eyelaserclinic.co.za

### Donor details:

**Individual:** .....  
South African ID no. ....  
Unit 607  
The Herschel  
7 Herschel Close  
Cape Town  
7708  
South Africa

Email: .....  
Cell no: .....

Date : 2025/10/04

#	Item & Description	Qty	Price	Amount
1	A18 Donation No goods or services were provided in return for this donation.	1.00 Item	10,000.00	10,000.00
			Sub Total	10,000.00
			<b>Total</b>	<b>R10,000.00</b>

### The Gift of Sight Trust

Bank Investec Bank Limited

Branch 100 Grayston Drive, Sandton

Branch code 58 01 05

Type of account Current Account

Account name The Gift Of Sight Trust

Account number 10011791410

Company No. 2017/000205/IT

Swift Code IVESZAJJXXX

Reference: Use your Company / Surname as reference for payment & email POP to [ceo@eyelaserclinic.co.za](mailto:ceo@eyelaserclinic.co.za)

**Confirmation:** The receipt is issued for the purposes of section 18A of the Income Act, 1962 and that the donation has been or will be used exclusively for the benefit of Gift of sight patients.

**Disclaimer:** All funds received for the A18 fundraising events are non- refundable. The Trust assumes no further liability beyond the receipt of donations. Thank you for your understanding and support.