



Current Masjid Address:

11970 W. Larch Road. Tracy, CA 95304

Mail to:

Tracy Islamic Center

P.O. Box 1644

Tracy, CA 95378

**Monthly Donation
Form**

Please use this form to authorize Tracy Islamic Center (TIC) to charge your bank account the specified amount on the specified date of every month. If you wish to stop your monthly donations, please contact TIC at (209) 830-6286 or finance@tracyislamiccenter.org and indicate that you wish the monthly donations to end, specifying your name, address, and phone number.

Please fill this form and mail it to the address above, or hand it to any TIC board member.

Name: _____

Address: _____

City: _____

State: _____

Zipcode: _____

Monthly Donation

- ☐ Towards Masjid Construction
☐ Towards Masjid Operations
☐ Others -

Phone: _____

Email: _____

☐ \$100

☐ Other Amount _____

Please fill the box below or provide a Voided Check

Name of Bank/Financial Institution

Name on Account (Please Print)

☐ Checking Account # (or Attach a Voided Check)

☐ Savings Account # (or Attach a Voided Check)

Routing Number

I authorize Tracy Islamic Center to debit the bank account in this form, for the noted amount on the _____ day of every month. This payment is a donation to a non-profit religious organization. I understand that because this is an electronic transaction, these funds may be withdrawn from my account as soon as the above noted transaction date. In the case of an ACH Transaction being rejected for Non Sufficient Funds (NSF) I understand that Tracy Islamic Center may at its discretion attempt to process the charge again within 30 days, and agree to an additional \$25.00 charge for each attempt returned NSF, which will be initiated as a separate transaction from the authorized payment. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I certify that I am an authorized user of this bank account, and that I will not dispute the payment with my Bank, so long as the transaction corresponds to the terms indicated in this form.

Signature _____

Date _____

Tracy Islamic Center is a 501(c)(3) religious non-profit organization and your contribution is tax deductible to the full extent of the law. Please consult your tax-advisor.

Thank you for your generous support of the good cause.