



(In the name of Allah, the most beneficent and merciful)
North Penn Mosque

600 Maple Avenue, Lansdale, PA 19446
Tel: 215 361 2229, Fax: 215 361 2759
A nonprofit Religious Organization

Tax ID No: 23-2819188
State of Pa, Entity No: 2842078

Authorization for monthly/ yearly Donation Deduction from My/ Our Bank Account

I (we), the undersigned, hereby authorize and request North Penn Mosque (NPM), located at the above address, to initiate debit entries or effect a charge by any other commercially accepted practice to my (our) checking/ savings account indicated at the financial institution identified in this authorization, and I (we) authorize and request the financial institution to honor the debit entries initiated by NPM directly or, through its own authorized banker or, its agent and debit such account. This authorization is for my (our) monthly voluntary donation for the running expenses of the Mosque. This authority is to remain in effect until NPM and the financial institution listed below have received written notification from me (or the either of us) of its revocation in such a manner and time as to afford NPM and the financial institution a reasonable opportunity to act upon it. I acknowledge that the originator of electronic debit transactions to my (our) account must comply with the provisions of the United States law.

Amount to be charged: \$ _____ (dollars) per Monthly Yearly

Charges can be posted on the 5th day of every monthly or, once a year on the same day and month if yearly Starting next month.

My/ Our Names: _____
_____ (please print exact account name(s))

My/Our Address: _____

My/ Our Tel. No: _____

My/Our Bank's Name _____

My/Our Account No: _____

Routing/ ABA No: _____ (the 9 digits on check before account no.)

My/Our Signatures: _____