

**Mufaddal Qardan Hasana Hussain (Saving) Scheme  
Anjuman-e-Saifee, Chicago**

**DIRECT DEBIT AUTHORIZATION FORM**

<b>YOUR INFORMATION</b>	<b>DEBIT THIS ACCOUNT</b>
Name:	Financial Institution/Bank Name:
Address:	Address:
City/State/Zip Code	City/State/Zip Code
Telephone:	Account Type: Checking / Saving
Email:	
Ejamaat ID No:	Account Number:
Date:	Routing Number:
I hereby authorized Anjuman-e-Saifee, Chicago to debit monthly amount from my account as mentioned on this form towards my Mufaddal Qardan Hasana Hussain account.	Monthly Amount to be debited: Amount to be debited: \$ _____ Bi-weekly _____ Monthly _____ One time _____
Signature	Duration: 6/12/24/36 Other:

**TERMS AND CONDITIONS**

By signing this agreement you are authorizing Anjuman-e-Saifee, Chicago to transfer money (i.e. make debits) as indicated above from your financial institution/bank account to apply to your Mufaddal Qardan Hasana payment. You will be responsible for any transaction or bank charges occurred for any reason or due to the not enough funds in your account, or not able to notify prior to the 10<sup>th</sup> for any change.

*Mail this form to:*  
Mufaddal Qardan Hasana, 10S252 Kingery Hwy (Rt. 83), WillowBrook, IL 60527  
Phone: (630) 320-0638 Fax: (630) 320-0637

**Please attached a voided check here**