



# Pledge Form

ICMC • P.O. Box 76, Crystal Lake, IL 60039 • (815) 893-6005  
• FEIN# 26-0604204 • IBT#65656493

*"The deeds most loved by Allah (SWT) (are those) done regularly, even if they are small  
(Bukhari, Muslim)*

## Pledge Information:

**One-time** donation in the amount of: \$ \_\_\_\_\_

\***\$25/month** donation.

\***\$50/month** donation.

\***\$75/month** donation.

\***\$100/month** donation

\***MONTHLY** donation in the amount of: \$ \_\_\_\_\_ / Month

Starting on: \_\_\_\_\_ and Ending by: \_\_\_\_\_ for \_\_\_\_\_ Months

\* Charged on a Monthly basis as indicated above.

**PAYMENT METHOD:**  Cash  Check  Charge  CHARGE

## Donor Information

Name: \_\_\_\_\_

Phone#: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

E-mail Address: \_\_\_\_\_

## Credit Card Information

Credit Card Type: \_\_\_\_\_

Account No: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Last 3 digits on back of the card: \_\_\_\_\_

## On-Line Donation Options

- 1) Make one time or recurring payments from your bank to ICMC account at:
  - Chase Bank: Routing # 071000013
  - Account # 729509729
- 2) Make on-line donation through PayPal to ICMC through our website at <http://www.icmc-us.org>.

## Acknowledgement Information:

I give my permission to ICMC to withdraw from my Credit Card the amount I have indicated above.  
I also understand that I may change or end monthly donation agreement at any time with a written notice.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_