



## Authorization Agreement for Monthly Donations

Title: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Dr. ☐ Mr. & Mrs. ☐ Dr. & Mrs. ☐ Dr. & Mr. ☐ Dr. & Dr.

Filing Status: ☐ Single ☐ Married, jointly ☐ Married, separately

Donor(s) Name(s): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**For school recommendations only:** we will share your contact information. ☐ No thank you

<b>2023 Tax Year Original Individual</b> Single filers maximum donation: \$655 Married filing jointly maximum donation \$1,308 <b>Recommend:</b> <input type="checkbox"/> IBE's most needed fund <input type="checkbox"/> School: _____ <input type="checkbox"/> Student(s): _____	<b>2023 Tax Year PLUS/Switcher</b> Single filers maximum donation: \$652 Married filing jointly maximum donation \$1,301 <b>Recommend:</b> <input type="checkbox"/> IBE's most needed fund <input type="checkbox"/> School: _____ <input type="checkbox"/> Student(s): _____
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Amount of my monthly donation to be applied first to my Original Individual donation and then my PLUS donation: \$ \_\_\_\_\_ per month.

Original Individual yearly total: \$ \_\_\_\_\_

PLUS/Switcher yearly total: \$ \_\_\_\_\_

Combined yearly total: \$ \_\_\_\_\_

I would like my donations to start: \_\_\_\_\_ 22<sup>nd</sup> \_\_\_\_\_ and end \_\_\_\_\_ 22<sup>nd</sup> \_\_\_\_\_  
MONTH YEAR MONTH YEAR

**Payment:**

Type of Credit Card: ☐ Visa ☐ MasterCard ☐ Discover ☐ American Express

Credit Card Number: \_\_\_\_\_ Expires: \_\_\_\_\_

Electronic Transfer If choosing Electronic Transfer, a voided check must be attached to this form

Account #: \_\_\_\_\_ Routing #: \_\_\_\_\_

I hereby authorize Institute for Better Education (IBE) to automatically charge the account indicated above for the amount of the donation listed above on the 22<sup>nd</sup> of each month. If the 22<sup>nd</sup> falls on a weekend or holiday, I understand my card will be charged the following business day.

Please complete and return form to Jodi Schulz at jschulz@ibescholarships.org.

Donor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Notice (A.R.S. 43-1603): A School Tuition Organization cannot award, restrict or reserve scholarships solely on the basis of a donor recommendation. A taxpayer may not claim a tax credit if the taxpayer agrees to swap donations with another taxpayer to benefit either taxpayer's own dependent.



**Institute for  
Better Education**

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