



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

<p>2025 Tax Year Original Individual</p> <p>Single filers maximum donation: \$769 Married filing jointly maximum donation \$1,535</p> <p>Recommend:</p> <p><input type="checkbox"/> IBE's most needed fund <input type="checkbox"/> School: _____ <input type="checkbox"/> Student(s): _____</p>	<p>2025 Tax Year PLUS/Switcher</p> <p>Single filers maximum donation: \$766 Married filing jointly maximum donation \$1,527</p> <p>Recommend:</p> <p><input type="checkbox"/> IBE's most needed fund <input type="checkbox"/> School: _____ <input type="checkbox"/> Student(s): _____</p>
--	--

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: _____ 22nd _____ and end _____ 22nd _____
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 22nd of each month. If the 22nd 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.



T: 520.512.5438
F: 520.203.0184

921 N. Swan Rd.
Tucson, AZ 85711

services@ibescholarships.org
ibescholarships.org