



MASJID KAMPUNG SIGLAP
DARUL QURAN SINGAPURA
451 MARINE PARADE RD, 449283

INFAQ GIRO

This form may take 3 minutes.

IMPORTANT: Do not fax or email this form as original signature(s) is needed. The bank account holder must sign against any changes made. Do not use correction fluid or tape. Forms with incomplete details will be rejected.

One-time application, monthly donations, life-time rewards! Towards building Quranic generations.

Dakwah has an administrative as well as implementation cost implication, which is unfortunately, one of the biggest challenges that mosque faces. With your continuous financial assistance, i.e sadaqah or zakat, regardless of amount, we hope to continue our dakwah efforts especially in programs related to Quranic studies.

'Invite to the path of your Lord with wisdom & good advice & engage them in a manner that is best' (Surah Al-Nahl, verse 125)

APPLICANT'S PARTICULARS & AUTHORISATION

Name of Applicant (in block letters)

Residential Address (in block letters)

Unit No.

Postal Code

NRIC/FIN No.

Email Address

Contact No.

| | | | | | |
|--|------|--|-----|--|-----|
| | (HP) | | (H) | | (O) |
|--|------|--|-----|--|-----|

Name of Bank (in block letters)

Branch

Bank Account No.

| | | |
|--|--|--|
| | | |
|--|--|--|

Name of Account Holder - as in Bank's Records (in block letters)

Name of Billing Organisation

LEMBAGA PENTADBIR MASJID KAMPUNG SIGLAP (LPMKS)

Deduction Amount (please tick)

Others (please state amount)

| | | | | | | | |
|--|------|--|------|--|------|--|----|
| | \$10 | | \$20 | | \$50 | | \$ |
|--|------|--|------|--|------|--|----|

- I/we hereby instruct you to process the LPMKS's instructions to debit my/our account.
- You are entitled to reject the LPMKS's debit instruction if my/our account does not have sufficient funds and charge me/us a fee for this. You may also at your discretion allow the debit even if this results in an overdraft on the account and impose charges accordingly.
- This authorisation will remain in force until terminated by your written notice sent to my/our written revocation through the LPMKS.

Signature/Thumbprint (As in bank's records)

Please proceed to the branch with your identification for thumbprint

Date

FOR LEMBAGA PENTADBIR MASJID KAMPUNG SIGLAP (LPMKS)'S COMPLETION

| | | | |
|---------|--------|-------------------|--------------------------------|
| Bank | Branch | LPMKS Account No. | LPMKS Customer's Reference No. |
| 7 3 3 9 | 5 3 4 | 3 2 6 8 2 2 0 0 1 | |

FOR BANK/FINANCIAL INSTITUTION'S COMPLETION

This application is hereby **REJECTED** (please tick) for the following reason(s):

- | | |
|--|---|
| <input type="checkbox"/> Signature/thumbprint differs from Financial Institution's records | <input type="checkbox"/> Amendments not countersigned by customer |
| <input type="checkbox"/> Signature/thumbprint incomplete/unclear | <input type="checkbox"/> Wrong account number |
| <input type="checkbox"/> Account operated by signature/thumbprint | <input type="checkbox"/> Others: _____ |

Name of Approving Officer

Authorised Signature

Date