



LHUSD #1 School Tax Credit for Extra-Curricular Activities

OFFICIAL USE ONLY	
Receipt#:	_____
\$ Amount	_____
PAID BY:	CASH
Check/Card#	_____
Initialed:	_____

Designate Your Tax Dollars to Help Students of LHUSD #1

Did you know that if you must file and pay State of Arizona income taxes, you may contribute to any of the LHUSD #1 schools and receive a **Dollar-for-Dollar tax credit of equal value** when you file your tax return? Your tax dollars support extra/co-curricular school programs in Lake Havasu City, and **your tax dollars stay in Lake Havasu City instead of going to Phoenix!**

By giving now, you reduce your state income tax liability later! It's a win-win for all of us!
Make checks payable to LHUSD #1

To pay by credit card, visit the District Office OR make an online payment at www.lhusd.org

Your Name (Please Print) _____ Date _____

Address _____ City _____ State _____ Zip _____

Home/Cell Phone _____ Email (For electronic receipt only) _____

Amount of Contribution: \$ _____

MAXIMUM eligible tax credit: \$200 if AZ Income tax filing status is Single OR \$400 if AZ Income tax filing status is Married, filing a joint return

YOU hold the power to choose how YOUR state income tax dollars are invested!!

1) Select Your School:

- | | | |
|--|---|---|
| <input type="checkbox"/> Lake Havasu High School | <input type="checkbox"/> Havasupai Elementary | <input type="checkbox"/> Oro Grande Classical Academy |
| <input type="checkbox"/> Thunderbolt Middle School | <input type="checkbox"/> Jamaica Elementary | <input type="checkbox"/> Smoketree Elementary |
| | <input type="checkbox"/> Nautilus Elementary | <input type="checkbox"/> Starline Elementary |

2) Select Your Designated Preference:

- | | |
|--|---|
| <input type="checkbox"/> No Preference - distribute to activities as needed | <input type="checkbox"/> Approved Club/Program _____ |
| <input type="checkbox"/> Athletic Scholarship: LHHS <u>or</u> T-Bolt | <input type="checkbox"/> Kindergarten Enrichment (for full day program) |

***OPTIONAL: Complete this section ONLY if designating funds for a specific middle school or high school student:**

*Student Name: _____ **SCHOOL:** LHHS _____ T-Bolt _____

Athletic fee **OR** Club _____

All contributions receive a receipt for tax purposes. If you pay by mail, the receipt will be mailed to you.

Return this form with your contribution to:

LHUSD #1 - Tax Credit
2200 Havasupai Blvd., Building C
Lake Havasu City, AZ 86403

Phone: 928-505-6917 Fax: 928-505-6999

Additional Forms and Information at www.lhusd.org

Thank You for Your Support!