



# 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](http://www.lhusd.org)

Taxpayer Name (Please Print) \_\_\_\_\_ Date \_\_\_\_\_

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

Home/Cell Phone \_\_\_\_\_ Email (For electronic receipt only) \_\_\_\_\_

**Amount of Contribution:** \$ \_\_\_\_\_ Contributions are **NONREFUNDABLE** and **NONTRANSFERABLE**

**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: 928-505-6900 Fax: 928-505-6999

Additional Forms and Information at [www.lhusd.org](http://www.lhusd.org)

*Thank You for Your Support!*