



OFFICIAL USE ONLY
Receipt #: _____
Check #: _____
Ck Amt. \$: _____
Cash \$: _____

LAKE HAVASU UNIFIED SCHOOL DISTRICT #1
 2200 Havasupai Blvd. **Building A**, Lake Havasu City, AZ 86403-3798
Phone: (928) 505-6917, Fax: (928) 505-6980
www.havasu.k12.az.us

EXTRACURRICULAR ACTIVITY FEE TAX CREDIT

This payment is eligible for the Arizona State income tax credit as allowed by A.R.S. §43-1089.01.
 Please consult with your personal tax preparer to determine the application of this credit. If you mail in your form and check, a pre-numbered receipt will be mailed to you.

Please fill out one form per contributor. **PLEASE PRINT. Make check payable to** Lake Havasu Unified School District #1, 2200 Havasupai Blvd. **BUILDING A**, Lake Havasu City, AZ. 86403-3798.

Contributor/Taxpayer (One Name Only): _____ Date: _____
 Contributor/Taxpayer Address: _____
 City: _____ State: _____ Zip: _____
 Home Phone: _____ Work Phone: _____

Please select your participation amount:

- \$ _____ **Maximum of up to \$200 (AZ Income tax filing: Single or Widowed)**
- \$ _____ **Maximum of up to \$400 (AZ Income tax filing: Married Filing Jointly)**

Please select your school preference:

- Lake Havasu High School
- Round Table Program
- Thunderbolt Middle School
- Smoketree Elementary
- Oro Grande Elementary
- Nautilus Elementary
- Havasupai Elementary
- Starline Elementary
- Jamaica Elementary

Please check the box of your choice: (Check www.havasu.k12.az.us for Preference List)

- No Preference (Distributed based on program need.)**
- Preference if any:** _____
 *Must be from approved preference list only.

If designating Middle School or High School students, complete below:

NEW!!! The high school Sport fee is \$400 per athlete per school year. NO FAMILY CAP.
T-Bolt Sport fee is \$100 per Athlete per sport except Soccer is \$75 per athlete. NO FAMILY CAP.

Student's Name: _____ School: _____ Activity: _____ Amt: _____
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School District Official's Signature: _____
 Revised 4/14/10