

Bologna Elementary

Extracurricular Activity Fee / Tax Credit Contribution Form
 Complete this form and return the completed form with your contribution to:
Rudy G. Bologna Elementary
 C/O Tax Credits
 1625 E. Frye Road
 Chandler, AZ, 85225

Contributor Information

First Name _____ Last Name _____
 Mailing Address _____
 City _____ State _____ ZIP _____ Phone _____

Method of Payment

If you would like to make a tax credit contribution using a credit card, debit card or e-check, please make your contribution on the Infinite Campus Parent Portal. To contribute online navigate to: https://campus.cusd80.com/campus/portal/chandler.jsp	<input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Money Order Payable to: Chandler Unified School District Total Contribution Amount: \$ _____
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Contribution Designation

- Please direct my contribution as needed.
- Please direct my contribution to support the following specific extracurricular activities at Bologna Elementary:
- | | | |
|--------------------------------|--|---|
| \$ _____ General Education | \$ _____ Strings | \$ _____ 5 th Grade Space Center |
| \$ _____ Preschool | \$ _____ Art Club | \$ _____ 6 th Grade Science Camp |
| \$ _____ Kindergarten | \$ _____ Drama Club | \$ _____ 6 th Grade Renaissance Festival |
| \$ _____ 1 st Grade | \$ _____ Reading Club | \$ _____ 6 th Grade Biosphere Trip |
| \$ _____ 2 nd Grade | \$ _____ Robotics Club | \$ _____ Other: |
| \$ _____ 3 rd Grade | \$ _____ Safety Patrol | \$ _____ Other: |
| \$ _____ 4 th Grade | \$ _____ Service Club | \$ _____ Other: |
| \$ _____ 5 th Grade | \$ _____ Student Council | \$ _____ Other: |
| \$ _____ 6 th Grade | \$ _____ Technology Club | \$ _____ Other: |
| \$ _____ Special Education | \$ _____ Yearbook Club | |
| \$ _____ General Music | \$ _____ 3 rd Grade Kartchner Caverns | |
| \$ _____ Band | \$ _____ 4 th Grade Grand Canyon | |
| \$ _____ Choir | \$ _____ 5 th Grade Space Center | |
| \$ _____ Orchestra | \$ _____ 5 th Grade Sonoran Desert Trip | |

If applicable, please specify which student(s) the contributions above will benefit:

	Activity/Grade Level	Student First Name	Student Last Name
\$ _____	_____	_____	_____
\$ _____	_____	_____	_____
\$ _____	_____	_____	_____
\$ _____	_____	_____	_____
\$ _____	_____	_____	_____

For Chandler Unified School District Use Only

Received By: _____ **Total Received: \$** _____ **Date:** _____

This contribution is eligible for the Arizona State income tax credit as allowed by ARS § 43-1089.01. Up to \$200 per individual and up to \$400 for married couples filing jointly can be claimed on personal income taxes. An official receipt will be mailed to the address provided by Jan 31. Contributions are non-refundable by the Chandler Unified School District. Please consult with your tax advisor to determine the application of the credit.