



Havasu Community Health Foundation

2126 McCulloch Blvd N Suite 14

Lake Havasu City, AZ 86403

Phone 928 453-8190 Fax: 928 453-8236

Qualifying Charitable Organization in the Arizona State Tax Credit Program

Keep Your Tax Dollars in Lake Havasu City - AZ Tax Credit: QCO 21974

Contributor/Taxpayer:	
Address:	
City/State/Zip:	
Phone:	
Email:	
Your Email confirmation will be sent as soon as it is submitted	

Select	AZ Income Tax Filing Status	Taxable Year
☐	Single or Widowed	
☐	Married filing Jointly	

The maximum QCO credit donation amount for **2025**:

\$495 single, married filing separate or head of household; **\$987** married filing joint.

The maximum QCO credit donation amount for **2026**:

\$506 single, married filing separate or head of household; **\$1,009** married filing joint.

<https://azdor.gov/individuals/income-tax-filing-assistance/tax-credits>

Arizona law allows QCO donations made during 2025 or donations made from January 1, 2026 through April 15, 2026 to be claimed on the 2025 Arizona income tax return. If a taxpayer makes a QCO donation from January 1, 2026 through April 15, 2026 and wants to claim the higher 2026 maximum credit amount, the taxpayer will need to claim the credit on the 2026 Arizona return filed in 2027.

The Health Foundation program you wish to contribute to

\$	Food Bank	Our Food Bank serves thousands of families and distributes over one million pounds of food annually.
\$	Veterans' Health Awareness	Our comprehensive Veterans' Health Awareness program provides housing for homeless veterans, transportation, and essential health services.
\$	Additional Contribution Program:	
\$	Total	

Sign here ►

Contributor/Taxpayer Signature

Contributor/Taxpayer Signature (Joint Filing)

Date

Transaction Fees - Non-refundable: You understand that a contribution payment, once charged to your credit card, is final and non-refundable with the exception that you can prove the transaction was made through an unauthorized use of your credit card. If you become aware of unauthorized use of your credit card, or it is lost or stolen, you must notify your credit card provider in accordance with its reporting rules. 90 cents of every dollar donated supports your charitable program of choice.

IN-OFFICE USE ONLY

Payment Method:

☐	Cash	☐	Cash/Check	☐	Check	☐	Credit	
☐	WALK-IN	☐	USPS	☐	AT EVENT	☐	FROM FOOD BANK	☐

Check:		Confirmation Code:		EXT	TX
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HCHF Representative

Date

Executive Director HCHF

Date

Havasu Community Health Foundation is a 501(c)(3) public charity serving health-related needs and social services in the Lake Havasu community.

Our taxpayer identification number is 20-1839858, AZ Tax Credit: QCO 21974

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