



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

501(c)(3) public charity – Taxpayer ID 20-1839858

Keep Your Tax Dollars in Lake Havasu City

Contributor/Taxpayer: _____

Address: _____

City/State/Zip: _____

Phone: _____

Tax Year

Email: _____

Your E-Mail confirmation will be sent as soon as it is submitted

Select AZ Income Tax Filing Status

Single or Widowed

Jointly (Married)



The maximum QCO credit donation amount for 2023:

\$421 single, married filing separate or head of household; \$841 married filing joint.

The maximum QCO credit donation amount for 2024:

\$470 single, married filing separate or head of household; \$938 married filing joint.

Refer to AZ Department of Revenue <https://azdor.gov/individuals/income-tax-filing-assistance/tax-credits>

The Health Foundation program you wish to contribute to:

Total	Name of Qualifying Charity
_____	HCHF Food Bank
_____	Student Assistance Program (SAP)
_____	Veterans' Health Awareness
_____	<i>Additional Contribution</i>
_____	Total Contribution

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.

Sign here ▶

Contributor/Taxpayer Signature

Contributor/Taxpayer Signature (Joint Filing)

Date

HCHF Representative

Date

Payment Method

CASH – CHECK – CREDIT

Confirmation Code: _____