



Extracurricular Activity (ECA) Contribution Form



Contributor: _____ Phone: (____) _____ - _____
FIRST NAME LAST NAME

Address: _____ City: _____ State: _____ Zip: _____

*Student name: _____
FIRST NAME LAST NAME *Fill in student name ONLY if your donation is for a school-sponsored trip.

School name(s):	Activity:	Amount:
Contributions are NONREFUNDABLE .	Total amount contributed:	

Visit www.mpsaz.org/eca to make your contribution online. This is a secure website that allows you to pay and print your receipt.

MC/Visa #: _____ Expiration Date: _____

CCV# (Last 3 digits on signature panel): _____ Signature: _____

Please make checks payable to Mesa Public Schools. Send to: ECA Tax Credit, Mesa Public Schools, 63 East Main Street #101, Mesa, Arizona 85201-7422.

This contribution may be eligible for the Arizona state income tax credit as allowed by Arizona Revised Statute §43-1089.01. The tax credit is limited to \$200 for a single individual or \$400 for a married couple. Please consult with your personal tax adviser to determine the application of the credit. For other questions, call (480) 472-0133. 94-26-28 W (7/14)