

For additional information about the Tax Credit and how to make a contribution contact: Cochise Elementary School at (520) 384-2540.

Name _____ SS# _____

Address _____ Donation Amount \$ _____

Designated program: _____ School decides program _____

I wish to make monthly donations _____ (if so, please duplicate this form, or call the school office, 384-2540, for additional forms).

Thank you for your support! A receipt will be mailed to you.

Cochise Elementary School "A Great Place to Learn"

Office use:

Receipt issued by: _____

Date: _____