

what it is called to be, it has the power to set the world on fire. I encourage everyone to prayerfully consider re-directing their Arizona state tax liability to our Catholic schools. It will not cost you any more than what you already owe in state taxes. Your contribution will make a major difference in the lives of thousands of children."

— Bishop Thomas J. Olmsted

SHOOK CATHOLIC OF BOOK

# Catholic Education

Our Children. Your Tax Credit. Their Future.

By partnering with Catholic Education Arizona, you are giving the students of SACRED HEART a quality Catholic Education. Best of all, your gift lasts a lifetime.

#### **■** GRADUATION RATES

99% of students at Catholic Schools graduate from high school.

### ADVANCEMENT

97% of these graduates go on to postsecondary education or enter the military.

#### ■ SCHOLARSHIPS

Graduates of Catholic Schools are among the highest recipients of university scholarships.

## Arizona Private School Tuition Tax Credit CONTRIBUTION FORM

CONSIDER ANY AMOUNT UP TO THE TAX YEAR MAX CREDIT BELOW:	2018	2019
Single Max Credit	\$1,107	\$1,135
Married Max Credit	\$2,213	\$2,269
Give By	4/15/2019	4/15/2020
CONTRIBUTOR		
First Name:		M.I.
Last Name:		
Spouse Name:		
Address:		
City:	State:	7IP·
Phone:		
Email:		
Member(s) of Parish:		
Thank You! We will share your contact information so that our schools		
can thank you for your support.   Not necessary		
STATE-REQUIRED DISCLOSURE		
Have you already made a tax credit gift to another School Tuition Organization (STO) this year?  O YES: I gave \$ for Tax Year 20 O No, this is my first contribution to any STO this year.		
For Today's Contribution: O Filing Single OMarried Filing Jointly O Tax Year intended to claim Credits 20		
CONTRIBUTION		
School 1*:		
(*or indicate General Scholarship F	Fund)	Total: \$
PAYMENT INFORMATION		
I am paying by: O Check Make payable to Catholic Education Arizona O Visa O Master card O Discover O AMEX		
Card Number:		

#### (OR) STRETCH YOUR PAYMENT YEAR ROUND

Expires:

Would you like to STRETCH your contribution into smaller, monthly/bi-monthly payments? Register for **SCHEDULE PAY** at **CEAZ.ORG** or call our office for assistance at 602-218-6542.

SB19-131

CVV Code