

AP/IB TEST PAYMENT FORM

Please check the appropriate box for your AP/IB TEST payments and fill out contribution form below if paying at District or School site by mail or in person.

If you choose to pay online go to <https://az-mesa.intouchrecepting.com/> to make your payment and skip this form.

ECA AP/8472 OR IB/8403 (PLEASE CIRCLE EITHER THE AP OR THE IB ACCOUNT)

ECA payments qualify for AZ extracurricular activity tax credit. Do not pay more into ECA than the state allows; \$400 married filing jointly, \$200 single/head of household per taxable year. Funds will be used for the designated AP or IB test and will remain in the designated account. Funds will not be transferred to any other account. **ECA payments are non-refundable and non-transferable.** Consult with a tax Advisor to determine if you are eligible for this tax credit.

\$ _____ (complete contribution form below)
Deposit funds into the (ECA) account. I'm agreeing that I qualify for the AZ tax credit.

AND/OR – PAYMENTS CAN BE SPLIT BETWEEN ECA & AUX

AUX AP/3472 OR IB/3403 (PLEASE CIRCLE EITHER THE AP OR THE IB ACCOUNT)

Auxiliary Test Account AP/3472 (Advance Placement) or IB/3403 (International Baccalaureate) does not qualify for the AZ Tax Credit. By selecting this choice option, I am aware that I do not qualify and/or I will not be taking advantage of the Az Tax Credit for the AP or IB Testing. If your student does not take the AP or IB test due to unforeseen circumstances the Auxiliary Test Account AP/3472 or IB/3403 will be the only account that a refund may take place.

\$ _____
Deposit funds into Auxiliary Test Account. I am aware that I will not be taking advantage of the AZ Tax Credit.

Print Student Name	Course Name	Teacher Name
Print Payee Name	Payee Signature	Date



Extracurricular Activity (ECA) Contribution Form



Contributor: _____ Phone: (____) _____ - _____
First name Last name

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

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

School name(s):	Activity:	Amount:
Contributions are NONREFUNDABLE and NONTRANSFERABLE		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 #: _____

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 (7/12)