MOUNT CARMEL SCHOOL

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Educational Tax Credit
Taxpayer Credit

1. Mount Carmel School - Tax ID No. 98-6018566

2. _____ _____
Taxpayer Name Taxpayer Address

3. _____
Date of ETC Contribution

4. **$** _____ **$** _____
Amount of Cash Contribution Check: Bank Name and Check No.

5. General Purpose
Purpose of Contribution (Must be general purposes to qualify for tax credit)

6. I, _____, confirm that I have not (taxpayer name and position in company) received any goods or service in exchange for this contribution.

7. _____
Taxpayer Signature

8. John S. Blanco, Business Manager
Principal Receiving Contribution

9. _____ _____
Signature of Principal Date

10. _____ _____
Amount Received Receipt