

# RECURRING DONATION REQUEST



Arizona Tuition Organization

PHONE: 602.295.3033

EMAIL: admin@azto.org

AZTO offers recurring monthly donation processing for participating donors. You can give throughout the year in smaller increments up to your tax liability. Please see azto.org for current tax year limits, eligibility details, and participating schools. Monthly donations are processed the first week of each month. You will receive an email receipt with each processed transaction and an annual receipt with your cumulative donation total by mail. Please complete this form and email it to admin@azto.org. A valid email address is required for monthly participation.



## 1. DONOR INFORMATION

Last \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_ Spouse (if filing jointly) \_\_\_\_\_ M.I. \_\_\_\_\_

Street (same as credit card billing address) \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_  First Time AZTO Donor

### Tax Filing Status

Married Filing Jointly OR  Individual, Married Filing Separate, or Head of Household



## 2. DONOR RECOMMENDATION

General Scholarship fund for any qualified student  Student Recommendation (optional)

Student's Name or Siblings \_\_\_\_\_

Partner School Name \_\_\_\_\_  
(See azto.org for Partner School List)



## 3. MONTHLY DONATION AMOUNT

I am requesting to participate in Recurring Monthly Donations for Tax Year \_\_\_\_\_

I would like to give \$ \_\_\_\_\_ monthly starting (MM/YEAR) \_\_\_\_\_

The last month my donation will be made (MM/YEAR) \_\_\_\_\_

The total cumulative amount of my donation will be \$ \_\_\_\_\_

If applicable, January thru April Donations are to be counted for Tax Year \_\_\_\_\_

SEE  
**AZTO.ORG**  
FOR TAX YEAR  
CREDIT LIMITS



## 4. CREDIT CARD INFORMATION AND AUTHORIZATION

Card Type:  MasterCard  VISA

Credit Card Number \_\_\_\_\_

Expiration Date (MM/YEAR) \_\_\_\_\_ CVV # (3 digit code) \_\_\_\_\_



### Donor E-Signature and Date

(X) \_\_\_\_\_ Date \_\_\_\_\_

I hereby authorize Arizona Tuition Organization (AZTO) to process recurring credit card donations on my behalf for the stated duration and tax year. I understand my donation will be processed the first week of each defined month. I also acknowledge the below notice and understand the final award decisions are at the complete and sole discretion of AZTO's governing body as defined by Arizona statute. "NOTICE: A SCHOOL TUITION ORGANIZATION CANNOT AWARD, RESTRICT OR RESERVE SCHOLARSHIPS SOLELY ON THE BASIS OF DONOR RECOMMENDATION. A TAXPAYER MAY NOT CLAIM A TAX CREDIT IF THE TAXPAYER AGREES TO SWAP DONATIONS WITH ANOTHER TAXPAYER TO BENEFIT EITHER TAXPAYER'S OWN DEPENDENT."