

SO (K-12 EITC) 2019-2020 **DONATION DATA CONFIRMATION**

Please complete and return this form with submission of your contribution, on a business check, along with a copy of the DCED approval letter. Check should be made payable to Foundation for Jewish Day Schools and mailed to 2100 Arch Street, Philadelphia, PA 19103. This form and DCED approval letter can accompany the contribution check in the mail OR sent via email to ematz@jewishphilly.org.

Questions: Ellen Horowitz Matz, Director, Educational Tax Credit Programs, at the email above or 215-832-0525.

Company Name	
Entity Type: Partnership S-Corp. C-Corp. LLC L	.LP 🖉 SPE 💜 Other, please explain
Contact Name	Title
Phone	Email
Name of person who determines school designation, if different	ent from above:
Name	Title
Phone	Email
K-12 EITC 2019-2020 DONATION Total Donation \$	
APPLICATION YEAR STATUS	
First year of two year application Second year	r of two year application One year application
PLEASE SELECT DAY SCHOOL PROGRAM(S) AND SPECIFY AMO	OUNT PER SCHOOL
Undesignated: Any Qualifying Day School \$	
Abrams Hebrew Academy\$	OROT: Special Needs Initiative\$
Jack M. Barrack Hebrew Academy	Raymond and Ruth Perelman Jewish Day School \$
Cheder Chabad \$\$	Politz Hebrew Academy\$
Ø Kohelet Yeshiva High School\$ \$	Talmudical Yeshiva of Philadelphia\$
I.S. Kosloff Torah Academy Girls High School \$	Caskey Torah Academy of Greater Philadelphia \$
Synagogue Kindergarten Program: Name	\$
usiness expense. As such, we recommend you select #3 or #4 The Individual School and the Foundation for Jewish D #1 Not recognize my gift other than in documents require #2 Know my company/personal name for administrative p	ns now stipulate that it must be deemed an ordinary and necessary as your acknowledgement/recognition option. ay Schools may d by law. (anonymous) ourposes only, but not publicly recognize my gift.
#3 © Know my company/personal name, and may recognize	, .
newspapers, publications, advertisements, etc.) AND	nool community, by FJDS, and include in public notifications (e.g.
#5 In the future, should Jewish Federation create a recogn Federation of your interest in enhanced recognition, should	nition process, I would like to be notified. (<i>This notifies the Jewish d such an opportunity be created</i> .)
IMPORTANT - I would like my donation to be recognized usin	g the following name:
Business Name and/or Preferred Personal Name (required) _	
 Signature (required)	Print Name (required) Date