

OSTC (K-12 OSTC) 2023-2024 **DONATION DATA CONFIRMATION**

PAYMENT INSTRUCTIONS: Wire transfer of your OSTC contribution is preferred and should be directed as follows: Bank Name - Firstrust Bank; Bank Address - 1515 Market Street Philadelphia, PA 19102; ABA # - 236073801; Account Name -Foundation for Jewish Day Schools of Greater Philadelphia – OSTC; Account # - 1000521350. In addition, please complete and return this form and a copy of the DCED approval letter via email together to: ematz@jewishphilly.org. Please notify me when the wire transfer is initiated. If wire transfer is not possible, checks should be made payable to Foundation for Jewish Day Schools and mailed to (NEW ADDRESS) 2 Commerce, 2001 Market St - 23rd Floor, Philadelphia, PA 19103

CONTACT: Ellen Horowitz Matz, Dir	ector, Educational Tax Credit F	Programs, at the email al	oove or 215-832-0525.	
Company Name				
Entity Type: 🗌 Partnership 🗎 S-Corp. 🖟 C-Corp). \square LLC \square LLP \square SPE \square Other, ple	ease explain		
Contact Name	Title			
Phone	Email			
Name of person who determines school design	-			
NamePhone				
■ K-12 OSTC 2022-2023 CONTRIBUTION Total C	ontribution \$			
APPLICATION YEAR STATUS				
\square First year of two year application	☐ Second year of two year application	ation 🗆 One year app	lication	
PLEASE SELECT DAY SCHOOL PROGRAM(S) AN				
☐ Undesignated: Any Qualifying Day School	\$ The Mes	ivta High School	\$	
☐ Abrams Hebrew Academy	\$ □ OROT: Sp	pecial Needs Initiative	\$	
☐ Jack M. Barrack Hebrew Academy	\$ Raymond	☐ Raymond and Ruth Perelman Jewish Day School \$\$		
☐ Caskey Torah Academy	\$ Politz He			
☐ Cheder Chabad		☐ Talmudical Yeshiva of Philadelphia\$		
☐ Kohelet Yeshiva High School		Ketana		
☐ I.S. Kosloff Torah Academy Girls High School			Ψ	
☐ Synagogue Kindergarten Program: Name _			\$	
 ACKNOWLEDGEMENT/RECOGNITION – Please contribution as a federal deduction, US Treasury 			_	
pusiness expense. As such, we recommend you			= = = = = = = = = = = = = = = = = = = =	
The Individual School and the Foundation	-			
#1 \(Not recognize my gift other than in docu	-			
#2 \(Know my company/personal name for a		•	t.	
#3 \square Know my company/personal name, and	may recognize my gift within the s	school community only.		
#4 Recognize my company/personal name I newspapers, publications, advertisements,		FJDS, and include in public	notifications (e.g.	
AND #5 ☐ I would like the Jewish Federation of Gre process is in development)	ater Philadelphia to be made awa	ire that I participate in the E	EITC program. (Note: This	
■ IMPORTANT - I would like my donation to be r	ecognized using the following name	me:		
Business Name and/or Preferred Personal Nan				
Signature (required)	Print	Name (required)	Date	