



PENNSYLVANIA  
EDUCATIONAL IMPROVEMENT  
TAX CREDIT PROGRAM

# JEWISH HARRISBURG EITC INTEREST FORM

This form is *not* a binding commitment to participate.

Please fill out the appropriate box so that we may contact you about your interest to participate in the EITC program.

## INDIVIDUAL

Name: \_\_\_\_\_

Employer: \_\_\_\_\_  retired

Spouse's Name: \_\_\_\_\_

Spouse's Employer: \_\_\_\_\_  retired

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

## LEGAL ENTITY

Entity Name: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Expected Investment Range: \_\_\_\_\_

School Designation 1: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

School Designation 2: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

