
## My contribution to the United Way Northwest Arkansas

Name: _____

Title: _____

Address: _____

Unit/Department: _____

### Payroll Deduction Options:

I pledge:

☐ $50 ☐ $25 ☐ $10 ☐ $5 ☐ $ _____ per pay period for

☐ 18 ☐ 24 pay periods

*Annual donation based on # of pay periods for employee.*

☐ or a one time gift of $ _____

### Direct Gift Options:

☐ Credit Card Payment: Click on the donate button at unitedway.uark.edu

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Total Annual Gift $ _____

Signature: _____

Date: _____

Please return your donation card to your dept. champion. List can be found at unitedway.uark.edu