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IN NORTHWEST
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Way**



of Northwest Arkansas

My contribution to the United Way of Northwest Arkansas

Name: _____

Title: _____

Address: _____

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Payroll Deduction Options:

I pledge per month for 18 or 24 pay periods

\$20 \$10 \$5 \$3 \$ _____

\$150 Annual Gift (\$12.50 monthly)

or a one time gift of \$ _____

(Annual donation based on number of pay periods for employee.)

Direct Gift Options:

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

Total Annual Gift: \$ _____

Signature: _____

Date: _____

**Please return your donation card to your dept. coordinator. List of Coordinators can be found at unitedway.uark.edu*