



**RAZORBACK
FOUNDATION**
EST. 1979

PAYROLL DEDUCTION AUTHORIZATION FORM

Account Information

ID Number (will be assigned if new): _____ **UA ID Number:** _____
First Name: _____ **Email:** _____
Last Name: _____ **Home Phone:** _____
Address: _____ **Mobile Phone:** _____
City, State, Zip: _____ **Business Phone:** _____

Annual Fund Membership Levels

- Broyles-Matthews Platinum \$20,000+**
- Broyles-Matthews Gold \$10,000-19,999**
- Broyles-Matthews Silver \$5,000-9,999**
- Super Hog \$3,000-4,999**
- Wild Hog \$2,000-2,999**
- Tush Hog \$1,000-1,999**
- Big Hog \$500-999**
- Big Red \$100-499**
- Razorback \$50-99**

Please indicate the amount that you wish to contribute:

TOTAL DONATION \$ _____

I wish to decline all ticket and parking benefits and make a tax-deductible gift to the ONE Razorback Fund

Payroll Deduction Options

I wish to authorize a payroll deduction gift of \$ _____ per pay period beginning on _____ (month), _____ (year)

Please continue this deduction:

- Until further notice.**
- ___ months for a total gift of \$ _____**

Signature _____

Date: _____

Complete form and mail, email or fax to:

Razorback Foundation - 1295 S. Razorback Rd., Ste. A, Fayetteville, AR 72701
Phone: 479.443.9000 Fax: 479.443.9527 gohogs@razorbackfoundation.com

_____ Date Processed by RFI