



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