

UNIVERSITY OF ARKANSAS FOUNDATION, INC.
Direct Deposit Authorization Form

Name _____ SS# _____

Address _____

City _____ State _____ Zip _____

Work Phone _____ Home Phone _____

- | | | |
|--|---|--|
| <input type="checkbox"/> New Sign-up | <input type="checkbox"/> Change Current Profile | <input type="checkbox"/> Stop Direct Deposit |
| <input type="checkbox"/> Use Current Information on File with the Foundation | | |

The University of Arkansas Foundation, Inc. is pleased to offer a direct deposit option for the annuity payment you will be receiving from us. This direct deposit option would allow us to deposit the funds directly into your account. The Foundation does **not charge** your account for this service. This is the same method of deposit you might be familiar with on other sources of income you receive.

If you would like to participate in this option please check the box below, sign and date where indicated and return to us in the enclosed envelope. **PLEASE INCLUDE A VOIDED CHECK FOR THE ACCOUNT YOU WOULD LIKE THE FUNDS DEPOSITED INTO.** We cannot place you on direct deposit without the information on your voided check.

In addition, we are required by the IRS to have your social security numbers and signatures on the enclosed W-9 form. We would appreciate you completing the form where highlighted and returning to us in the same enclosed envelope.

If you have any questions please feel free to e-mail Bekah Disheroon at (bekah@uark.edu) or see below for contact information.

- Yes, I do want my payment made via direct deposit. I have enclosed a voided check for the account I would like the funds deposited into.

Signed: _____

Dated: _____

Please send this completed form, voided check and W-9 form in the enclosed return envelope.

University of Arkansas Foundation, Inc.
ATTN: Bekah Disheroon
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Fayetteville, AR 72701
Phone 479-575-4725