



**University  
of Arkansas**  
RICH MOUNTAIN  
FOUNDATION

## Donation Form

First Name: ..... Middle Initial: ..... Last Name: .....

Mailing Address: .....

City: ..... State: ..... Zip Code: .....

Home Phone: ..... Cell Phone: .....

E-Mail Address: .....

**• I would like to contribute the following amount: \$ .....**

**• I wish to use the following method to pay for my pledge (check option below):**

- Paypal       Check       Cash
- I would like to use payroll deduction - UA Rich Mountain Employees  
(Contact office for payroll deduction form)

**I would like my contribution to support the following:**

- A previously established fund: .....
- I would like to establish a designated fund – please contact me to discuss options
- Equipment Needs: .....
- The UA Rich Mountain Foundation Unrestricted Fund for operations
- Memorial/Tribute gift: .....

Signature: ..... Date: .....

Please return this form to the UA Rich Mountain Foundation Office.