AR1000-CO 2008

## ARKANSAS INDIVIDUAL INCOME TAX SCHEDULE OF CHECK-OFF CONTRIBUTIONS

NAME •								SSN•			
SPOUSE'S NAME								SSN			
ADDF	RESS •										
CITY •								STATE_ •		ZIP•	
									each check-off contribution to the contributio		
contri you c AR10	bution. ontribut 100S or	Ente te wil r if th	er the amo I reduce yo e amount	ount in Bo our refunc in Box 9	ox 9 on Line d by a corre is not ente	e 52 spon ered	of the AR1000/AR	1000NR of sections of the section of	attached to any return or Line 24 of the AR100 e is not attached to your AR1000NR or Line 24 o	0S. The total amount AR1000/AR1000NR/	
amou		our cl							ule and submit a separa x - Accounting Branch,		
1. AI	RKAN:	SAS	DISASTI	ER RELI	IEF PROG	RA	М		CLS 1162 •	\$	
[	] \$1	[	] \$5 [	] \$10	[ ] \$20	[	Enter Amount	_ [	] Your Total Refund		
2. U.S. OLYMPIC COMMITTEE PROGRAM										\$	
[	] \$1	[	] \$5	[	] \$10	[	Enter Amount	_ [	] Your Total Refund		
3. AI	RKAN	SAS	SCHOOL	. FOR T	HE BLIN	D/SC	CHOOL FOR TH	E DEAF.	CLS 1164 •	\$	
[	] \$1	[	] \$5	[	] \$10	[	]Enter Amount	_ [	] <u>Your Total Refund</u>		
4. B/	ABY S	HAR	ON'S CH	IILDREN	N'S CATA	STR	OPHIC ILLNES	S PROG	RAMCLS 1144 •	\$	
[	] \$1	[	]\$5 [	] \$10	[ ] \$20	[	Enter Amount	_ [	] <u>Your Total Refund</u>		
5. OI	RGAN	DON	NOR AWA	ARENES	S EDUC	ATIC	N PROGRAM		CLS 1146 •	\$	
[	] \$1	[	] \$5	[	] \$10	[	Enter Amount	_ [	] Your Total Refund		
6. AI	REA A	GEN	ICIES ON	AGING	PROGR	AM.			CLS 1149 •	\$	
[	] \$1	[	] \$5	[	] \$10	[	Enter Amount	_ [	] Your Total Refund		
7. MILITARY FAMILY RELIEF PROGRAM										\$	
[	] \$1	[	]\$5 [	] \$10	[ ]\$20	[	Enter Amount	_ [	] Your Total Refund		
8. NEWBORN UMBILICAL CORD BLOOD INITIATIVECLS 1180 •										\$	
[	] \$1	[	]\$5 [	] \$10	[ ] \$20	[	]Enter Amount	_ [	] Your Total Refund		
9. TOTAL CHECK-OFF CONTRIBUTIONS										. \$	
AR1000-CO (R 8/1/08)											