Appendix G: Annual Report of Extra Income In Excess of \$5001

Campus Where Employed:	
Filing for Yea	ar:
1. Name of Employee:	ID#
2. Source and Amount of Income in Excess of \$500:	
(a)(Name of Public Agency)	(Amount In Excess of \$500)
(b)(Name of Public Agency)	\$(Amount In Excess of \$500)
(c)(Name of Public Agency)	\$(Amount In Excess of \$500)
(d)(Name of Public Agency)	\$(Amount In Excess of \$500)
-VERIFIC	CATION-
I do solemnly swear that the foregoing <i>Annual Report</i> herewith is in all things true and correct, and fully shown reported by me.	
State of Arkansas	Employee Signature
County of	this the day of
	Notary Public
My Commission Expires:	

¹ Consistent with Ark. Code. Ann §§ 21-8-201 - 21-8-204 and UA Systemwide Policies and Procedures 440.10, this form must be completed and submitted to Human Resources on or before January 31 of each year. Human Resources forwards the completed form to the President of the University of Arkansas System by February 10 of each year.