

STATE OF ARKANSAS
 Election By Small Business Corporations
AR1103 Supplemental Shareholder's Consent Form

Name of Corporation		Federal Employer Identification Number (FEIN)					
Name, Address, City, State and Zip code of each Shareholder.		Shareholder's signature. For this election to be valid, all shareholders must signify consent by signing below.		Shareholder Information			
	Signature	Date	# of Shares or % Owned	Check if family member	Date(s) Acquired	State of Residency	Social Security Number or FEIN

NOTE: Attach this supplemental consent form to the original AR1103 Election By Small Business Corporation form.
Mail completed Form to: Corporation Income Tax Section, P.O.Box 919, Little Rock, AR 72203-0919