

SECC Higher Education Authorization Form

... or, for participating universities, give online at secctexasgiving.org.

CONTROL NO.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

FOR OFFICE USE ONLY — ACCOUNT #

PREFIX	LAST NAME	FIRST NAME	M.I.
AREA CODE	WORK PHONE	SUFFIX (Jr., Ph.D., etc.)	
EMAIL ADDRESS			
UNIVERSITY			
COLLEGE OR DIVISION	DEPARTMENT	SECC COORDINATOR'S NAME	COORDINATOR'S PHONE #

Together We Care



RECOGNITION & ACKNOWLEDGEMENT

Select if you wish to receive acknowledgement from your charity(ies) and public recognition for your gift.

IF YOU DO NOT SELECT THIS OPTION, YOUR NAME AND DONATION WILL BE CONFIDENTIAL.

MAILING ADDRESS

CITY STATE ZIP

HOW I WISH TO DISTRIBUTE / DESIGNATE MY GIFT ... (minimum donation per charitable group is \$2.00):

DESIGNATED GIFTS : **EACH CHARITY HAS A SIX-DIGIT CODE**; the first two digits correspond to its charitable group (federation). To designate to one or more SECC-approved charities or federations, enter a six-digit code followed by a charitable gift amount. VERY IMPORTANT: **TOTAL ALL CHARITABLE GIFT AMOUNTS**; enter the result as either TOTAL ONE-TIME GIFT or TOTAL MONTHLY GIFT (below — in PAYMENT OPTIONS section).

CHARITY or FEDERATION CODE	CHARITABLE GIFT AMOUNT	CHARITY or FEDERATION CODE	CHARITABLE GIFT AMOUNT	CHARITY or FEDERATION CODE	CHARITABLE GIFT AMOUNT
CHARITY or FEDERATION CODE	CHARITABLE GIFT AMOUNT	CHARITY or FEDERATION CODE	CHARITABLE GIFT AMOUNT	CHARITY or FEDERATION CODE	CHARITABLE GIFT AMOUNT

PAYMENT OPTIONS ... select one and complete:

ONE-TIME GIFT (cash or check)
(attach gift; make check payable to STATE EMPLOYEE CHARITABLE CAMPAIGN)

TOTAL ONE-TIME GIFT
(total all charitable gift amounts above)

\$

PAYROLL DEDUCTION
(complete Authorization for Payroll Deduction)

TOTAL MONTHLY GIFT
(total all charitable gift amounts above)

\$

PAY PERIODS PER YEAR
(select appropriate)

x 9 12 = \$

AUTHORIZATION FOR PAYROLL DEDUCTION — I voluntarily authorize the monthly deduction from my after tax wages for a charitable contribution as indicated above. I understand that this authorization automatically expires with the November pay period of each year. I also understand that I may revoke this authorization at any time by giving my payroll office written notice. I have read and understood the "Distribution of Your Contribution" information on the back of this form.

EMPLOYEE ID NUMBER AUTHORIZED SIGNATURE DATE

PART 1 – TO LOCAL CAMPAIGN MANAGER

PART 2 – PAYROLL OFFICE COPY

PART 3 – EMPLOYEE COPY

SECC Higher Education Authorization Form

... or, for participating universities, give online at secctexasgiving.org.

CONTROL NO.

FOR OFFICE USE ONLY — ACCOUNT #

PREFIX _____ LAST NAME _____ FIRST NAME _____ M.I. _____

AREA CODE _____ WORK PHONE _____ SUFFIX (Jr., Ph.D., etc.) _____

EMAIL ADDRESS _____

UNIVERSITY _____

Together We Care



COLLEGE OR DIVISION _____ DEPARTMENT _____ SECC COORDINATOR'S NAME _____ COORDINATOR'S PHONE # _____

RECOGNITION & ACKNOWLEDGEMENT

Select if you wish to receive acknowledgement from your charity(ies) and public recognition for your gift.

IF YOU DO NOT SELECT THIS OPTION, YOUR NAME AND DONATION WILL BE CONFIDENTIAL.

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOW I WISH TO DISTRIBUTE / DESIGNATE MY GIFT ... (minimum donation per charitable group is \$2.00):

DESIGNATED GIFTS : **EACH CHARITY HAS A SIX-DIGIT CODE**; the first two digits correspond to its charitable group (federation). To designate to one or more SECC-approved charities or federations, enter a six-digit code followed by a charitable gift amount. VERY IMPORTANT: **TOTAL ALL CHARITABLE GIFT AMOUNTS**; enter the result as either TOTAL ONE-TIME GIFT or TOTAL MONTHLY GIFT (below — in PAYMENT OPTIONS section).

CHARITY or FEDERATION CODE _____ CHARITABLE GIFT AMOUNT \$ _____

CHARITY or FEDERATION CODE _____ CHARITABLE GIFT AMOUNT \$ _____

CHARITY or FEDERATION CODE _____ CHARITABLE GIFT AMOUNT \$ _____

CHARITY or FEDERATION CODE _____ CHARITABLE GIFT AMOUNT \$ _____

CHARITY or FEDERATION CODE _____ CHARITABLE GIFT AMOUNT \$ _____

CHARITY or FEDERATION CODE _____ CHARITABLE GIFT AMOUNT \$ _____

PAYMENT OPTIONS ... select one and complete:

ONE-TIME GIFT (cash or check)
(attach gift; make check payable to STATE EMPLOYEE CHARITABLE CAMPAIGN)

TOTAL ONE-TIME GIFT
(total all charitable gift amounts above)
\$ _____

PAYROLL DEDUCTION
(complete Authorization for Payroll Deduction)

TOTAL MONTHLY GIFT
(total all charitable gift amounts above) \$ _____ x PAY PERIODS PER YEAR
(select appropriate) 9 12 = TOTAL ANNUAL GIFT
(total monthly gift x pay periods) \$ _____

AUTHORIZATION FOR PAYROLL DEDUCTION — I voluntarily authorize the monthly deduction from my after tax wages for a charitable contribution as indicated above. I understand that this authorization automatically expires with the November pay period of each year. I also understand that I may revoke this authorization at any time by giving my payroll office written notice. I have read and understood the "Distribution of Your Contribution" information on the back of this form.

EMPLOYEE ID NUMBER _____ AUTHORIZED SIGNATURE _____ DATE _____

PART 1 – TO LOCAL CAMPAIGN MANAGER

PART 2 – PAYROLL OFFICE COPY

PART 3 – EMPLOYEE COPY

THANK YOU FOR YOUR SUPPORT ... visit www.sectexas.org for more information.

EXPIRATION OF PAYROLL DEDUCTION ... If you are paid once each month, this authorization expires with the pay period ending November 30 of next year. If you are paid twice monthly, this authorization expires with the pay period ending December 15 of next year. If you are paid every other week by an institution of higher education, this authorization expires with the 25th consecutive payroll period after the start of the campaign year.

DISTRIBUTION OF YOUR CONTRIBUTIONS:

• Undesignated Contributions

Undesignated contributions will be divided by all participating organizations in your campaign area according to the formula in the SECC directory.

• Designated Contributions

You may require a statewide federation or fund or local campaign manager to distribute your contribution to particular charitable organizations by entering their six-digit charity codes. **You may designate to charities within three charitable groups, or designate up to six charities within a single charitable group.** These distributions will be based on the percentage method, which ensures that all organizations share losses from resignations, retirements, revocations of deductions authorizations or other causes, proportionally. A separate percentage is derived for each charity's proportion of all campaign contributions, and this percentage is used to distribute contributions thereafter. As a result, the total amount pledged to an organization through payroll deduction probably won't match the dollar-for-dollar that organization was designated. If you would like a full description of this method, refer to 34 Tex. Admin. Code Section 5.48(j)-(k).

To designate your contribution to organizations in other regions of Texas, consult your SECC directory for the area's local campaign manager.

IRS STATEMENT ... In compliance with tax law, your contribution is fully deductible unless you receive a gift in conjunction with your donation. For tax deduction purposes, the IRS requires that the fair-market value of any "premium" received be subtracted from your payment amount.

CANCELLATION ... If you find it necessary to cancel your pledge during the year, please notify your payroll office in writing.

SAMPLE DESIGNATIONS / HOW TO DISTRIBUTE YOUR GIFT ... (minimum donation per charitable group is \$2.00):

Refer to the SECC directory or website to find the **six-digit code** for each selected charity or federation.

Enter a gift amount for each code. Minimum donation per group is \$2.00.

0 2 0 5 0 4 \$ 2 . 00
CHARITY or FEDERATION CODE CHARITABLE GIFT AMOUNT

3 3 0 0 0 0 \$ 4 . 00
CHARITY or FEDERATION CODE CHARITABLE GIFT AMOUNT

3 6 0 0 0 0 \$ 10 . 00
CHARITY or FEDERATION CODE CHARITABLE GIFT AMOUNT

0 2 4 0 0 6 \$ 4 . 00
CHARITY or FEDERATION CODE CHARITABLE GIFT AMOUNT

0 2 0 4 2 6 \$ 3 . 00
CHARITY or FEDERATION CODE CHARITABLE GIFT AMOUNT

0 2 0 4 5 5 \$ 2 . 00
CHARITY or FEDERATION CODE CHARITABLE GIFT AMOUNT

HOW TO COMPLETE PAYMENT OPTIONS:

Elect to give through **PAYROLL DEDUCTION** or **ONE-TIME GIFT**; complete information is required for either choice. Total all charitable gift amounts (above); enter result as either **TOTAL MONTHLY GIFT** or **TOTAL ONE-TIME GIFT**.

ONE-TIME GIFT (cash or check)

OR

PAYROLL DEDUCTION
(complete Authorization for Payroll Deduction)

TOTAL ONE-TIME GIFT
(total all charitable gift amounts above)
 \$.

TOTAL MONTHLY GIFT
(total all charitable gift amounts above)
 \$.

PAY PERIODS PER YEAR (select appropriate)
 x 9 12 = \$.

TOTAL ANNUAL GIFT
(total monthly gift x pay periods)
 \$.

AUTHORIZATION FOR PAYROLL DEDUCTION — I voluntarily authorize this deduction from my after-tax wages for a charitable contribution as indicated above. I understand that the expiration date of this authorization depends upon my pay schedule (see back for details). I also understand that I may revoke this authorization at any time by giving my payroll office written notice per the Comptroller's rules. I agree to comply with the Comptroller's rules concerning this deduction. I have read and understand the "Distribution of Your Contribution" information on the back of this form.

0 1 2 3 4 5 6 7 8 9
EMPLOYEE ID NUMBER

jane e. doe
AUTHORIZED SIGNATURE

10-15-xx
DATE