

Sample: One Time Gift

LUBBOCK 35		SECC Authorization Form		Account # _____ (circle use only)
Donatetoday		Iwill		Texas Tech University 733
Name (Prefix)	Last	First	MI	State Agency Name AND Number
				University Housing/Student Affairs & Enrollment Mgt
BANNER ID #				Dept./Division
2-1234				Lubbock
Work Phone				County
iwill.donatetoday@ttu.edu				Thankyou Smith
E-mail Address				2-4321
				SECC Coordinator's Name
				SECC Coordinator's Phone

enter both department & division

Acknowledgement:

Select ONLY ONE of the following options if you wish to receive acknowledgement for your gift. If you select both options, only option #2 will be given effect.

- I wish my gift (but not the amount) to be acknowledged. (HOME ADDRESS REQUIRED)
 - I wish the amount of my gift to be acknowledged. By choosing this option, I understand the amount of my gift becomes public information. I expressly waive confidentiality and authorize the release of information indicating the amount of my gift. (HOME ADDRESS REQUIRED)
- 2525 University Lubbock 79409
Home Address (REQUIRED) City Zip

Required for release of information

HOW I WISH TO DISTRIBUTE MY GIFT ... minimum donation per charitable group is \$2:

DESIGNATED GIFTS: EACH CHARITY HAS A SIX-DIGIT CODE; the first two digits correspond to its charitable group. To designate one or more charities or federated groups that appear in the directory provided, fill in the charity or federation six-digit identification number(s) and dollar amount(s).

IMPORTANT ... The subtotal of the three charitable groups (1+2+3) MUST MATCH the amount in either the "TOTAL MONTHLY GIFT" box or the "TOTAL ONE-TIME GIFT" box.

first two digits of all charities within this group must match	first two digits of all charities within this group must match	first two digits of all charities within this group must match
3 5 3 0 3 3 → \$ 10.00	→ \$	→ \$
Clarity Code Gift Amount	Clarity Code Gift Amount	Clarity Code Gift Amount
0 8 5 0 6 1 → \$ 10.00	→ \$	→ \$
Clarity Code Gift Amount	Clarity Code Gift Amount	Clarity Code Gift Amount
0 7 4 5 0 0 → \$ 30.00	→ \$	→ \$
Clarity Code Gift Amount	Clarity Code Gift Amount	Clarity Code Gift Amount
CHARITABLE GROUP SUBTOTAL#1 \$50.00	+ CHARITABLE GROUP SUBTOTAL#2 \$0.00	+ CHARITABLE GROUP SUBTOTAL#3 \$0.00

charity code does not need to match for one time gift

PAYMENT OPTIONS ... Please select one:

PAYROLL DEDUCTION (complete authorization below)

TOTAL MONTHLY GIFT (total of 3 group subtotals above)	x	PAY PERIODS PER YEAR 12	=	TOTAL ANNUAL GIFT (total monthly gift x 12 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.

Authorized Signature _____ Date _____ Effective Date ** 12-01-2009

signature only for payroll deduction

ONE TIME GIFT (CASH or CHECK) ... attach, make check payable to State Employee Charitable Campaign.

TOTAL ONE-TIME GIFT (total of 3 group subtotals above)
\$ 50.00



Please complete this form, print it, sign it, and turn it into your SECC Coordinator.

Turn in two copies of the form to University Deposits, make one copy for your files, and give a copy (pink) to the employee.

Sample: Payroll Deduction Gift

LUBBOCK 35				SECC Authorization Form				Account# _____ <small>(Office Use Only)</small>	
Donatetoday				Texas Tech University 733					
Name (Prefix)		Last		First		MI		State Agency Name AND Number	
R0000123								University Housing/Student Affairs & Enrollment Mgt	
BANNER ID #				Dept./Division					
2-1234				Lubbock					
Work Phone				County					
iwill.donatetoday@ttu.edu				Thankyou Smith			2-4321		
E-mail Address				SECC Coordinator's Name			SECC Coordinator's Phone		

**Banner ID (R#)
required for payroll
deduction**

Acknowledgement:

Select **ONLY ONE** of the following options if you wish to receive acknowledgement for your gift. If you select both options, only option #2 will be given effect.

- I wish my gift (but not the amount) to be acknowledged by the charity(ies) I have designated. (HOME ADDRESS REQUIRED)
 - I wish the amount of my gift to be acknowledged by the charity(ies) I have designated. By choosing this option, I understand the amount of my gift becomes public information. I expressly waive confidentiality and authorize the release of information indicating the amount of my gift. (HOME ADDRESS REQUIRED)
- 2525 University Lubbock 79409
Home Address (REQUIRED) City Zip

HOW I WISH TO DISTRIBUTE MY GIFT ... minimum donation per charitable group is \$2:

DESIGNATED GIFTS: **EACH CHARITY HAS A SIX-DIGIT CODE**; the first two digits correspond to its charitable group. To designate one or more charities or federated groups that you wish to receive your gift, enter the charity or federation six-digit identification number(s) and dollar amount(s).

IMPORTANT: Charitable Group codes must match in each column. Totals (1+2+3) MUST MATCH the amount in either the "TOTAL MONTHLY GIFT" or "ONE-TIME GIFT" box.

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PAYMENT OPTIONS ... Please select one:

PAYROLL DEDUCTION (complete authorization below)

TOTAL MONTHLY GIFT (total of 3 group subtotals above) \$ 37.00	x	PAY PERIODS PER YEAR 12	=	TOTAL ANNUAL GIFT (total monthly gift x 12 pay periods) \$ 444.00
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Must have signature

AUTHORIZATION FOR PAYROLL DEDUCTION -- I voluntarily authorize this deduction from my pay schedule (see back for details) and understand that I may revoke this authorization by giving the 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.

Authorized Signature _____ Today's Date 12-01-2009 Effective Date ***

*** (Enter "12-01-of next year" unless this form is being completed by a new employee)

**choose 9 or 12
month option**

Payroll Office will adjust for employees paid semi-monthly. Pledge period covers 12/01-11/30 each year.

Minimum # months is 3; manually enter 3.

Turn in two copies of the form to University Deposits, make one copy for your files, and give a copy (pink) to the employee.

Texas Tech University SECC Campaign

2009 LONE STAR CLUB

Check one

Please accept my contribution of \$_____ for

Lone Star **Gold**

or

Lone Star **Red & Black**

Name	
Phone Number	
Department	
Mail Stop	
E-mail	
Dept. Coordinator	

1. To qualify for **Lone Star Gold**, employees contribute one percent of their annual salary to the SECC.

Example: Annual salary \$25,200 x .01 = \$252.00 annual contribution. Monthly contribution is \$21.00.

2. To qualify for **Lone Star Red & Black**, employees contribute a minimum of one hour's pay per month.

Example: Divide annual salary by the number of payable hours in a year.
\$16,500/2,080 hours = \$7.93 hourly rate
\$7.93 X 12 = \$96.16 annual contribution

Please return this form with your SECC pledge/authorization form to your department campaign coordinator.