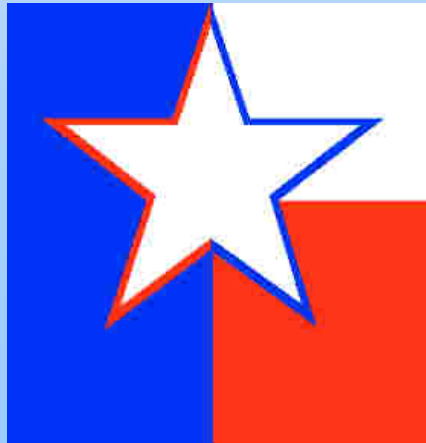


# UT HEALTH SCIENCE CENTER

## *2007 State Employee Charitable Campaign*

Presentation to Coordinators



# State Employee Charitable Campaign (SECC)

## What is it?

- ❖ Annual campaign
  - ❖ Conducted yearly in Sept - Oct
  - ❖ Allows payroll deduction
  - ❖ Supports approved agencies
- ❖ State law – 1994
  - ❖ Highly regulated

# State Employee Charitable Campaign (SECC)

## What is it NOT?

- ❖ It is **NOT** a United Way campaign
- ❖ Designations are crucial
- ❖ Pledges that are not designated by a code
  - ❖ Are shared proportionately by **ALL** agencies that receive designations
  - ❖ Are **NOT** given to United Way's allocation process
- ❖ If you do not designate your pledge
  - ❖ You will be supporting agencies whose goals you do not support

# Resources

- ❖ Loaned Executives
- ❖ Agency tours
- ❖ Agency representatives to speak at campaign group meetings

# Campaign Materials

- ❖ Agency Listing
- ❖ Pledge Card
- ❖ Report Forms

# Higher Education SECC Authorization Form

**CONTROL NO.**

Office Use Only

#41-San Antonio

Account #

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NAME (PREFIX)	LAST	FIRST	MI
MAILING ADDRESS			
CITY/STATE/ZIP			
UNIVERSITY/COLLEGE OR DIVISION/DEPARTMENT		AREA CODE	WORK PHONE
E-MAIL ADDRESS			

**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.)**

ADDRESS

	CITY	STATE	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 appear in the directory provided, fill in the charity or federation six-digit identification number(s) and dollar amount(s). **IMPORTANT ... Make certain the total of the "GIFT AMOUNT" boxes equals the total in either the "TOTAL MONTHLY GIFT" or "TOTAL ONE-TIME GIFT" box (below).**

<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> </table> <p style="text-align: center; font-size: small;">CHARITY CODE</p>							→	\$	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> </table> <p style="text-align: center; font-size: small;">GIFT AMOUNT</p>								→	\$	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> </table> <p style="text-align: center; font-size: small;">GIFT AMOUNT</p>						
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CHARITY CODE			GIFT AMOUNT					GIFT AMOUNT																	

**PAYMENT OPTIONS ... PLEASE SELECT ONE:**

**PAYROLL DEDUCTION**  
(complete authorization below)

<p style="font-size: x-small;">TOTAL MONTHLY GIFT (TOTAL ALL "gift amount" BOXES ABOVE)</p> <p>\$</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> </table>							x	<p style="font-size: x-small;">NO. OF PAY PERIODS PER YEAR (9 OR 12)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;"></td></tr> </table>		=	\$	<p style="font-size: x-small;">TOTAL ANNUAL GIFT</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> </table>						

**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 understand the "Distribution of Your Contribution" information on the back of this form.

Social Security #	Employee Signature	Date
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**ONE-TIME GIFT (cash or check) ...**  
attach, make check payable to State Employee Charitable Campaign

	\$	<p style="font-size: x-small;">TOTAL ONE-TIME GIFT (TOTAL ALL "gift amount" BOXES ABOVE)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> </table>							

**EXPIRATION OF PAYROLL DEDUCTION**

If you are paid once monthly, 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 nine 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 @-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 officer in writing.

**PAYMENT OPTIONS ... PLEASE SELECT ONE:**

**PAYROLL DEDUCTION**  
(complete authorization below)

**TOTAL MONTHLY GIFT**  
(total all "monthly gift" boxes below)  
\$ 25.00

**PAY PERIODS PER YEAR**  
9 or 12

**TOTAL ANNUAL GIFT**  
\$ 225.00

**OR**

Elect to give either through "PAYROLL DEDUCTION" or "ONE-TIME GIFT" (cash or check); complete information required for your choice.

**ONE-TIME GIFT (CASH OR CHECK)**  
(... attach; make check payable to State Employee Charitable Campaign)

**OR**

**TOTAL ONE-TIME GIFT**  
(total all "gift amount" boxes above)  
\$ 225.00

(Make certain the total of the "GIFT AMOUNT" boxes (below, in "DESIGNATION" section) equals the total in either the "TOTAL MONTHLY GIFT" or "TOTAL ONE-TIME GIFT" box.

**SAMPLE DESIGNATIONS ... MINIMUM DONATION PER CHARITABLE GROUP IS \$2:**

Refer to the SECC directory for your selected charities' six-digit charity codes and enter them in the charitable group boxes.

Enter the "GIFT AMOUNT" for each Charity Code.

0 2 0 5 0 4	→ \$		2	.00	0 2 0 4 2 6	→ \$		3	.00
CHARITY CODE			GIFT AMOUNT		CHARITY CODE			GIFT AMOUNT	
0 2 4 0 0 6	→ \$		4	.00	3 6 0 0 0 0	→ \$		1 0	.00
CHARITY CODE			GIFT AMOUNT		CHARITY CODE			GIFT AMOUNT	
3 3 0 0 0 0	→ \$		4	.00	0 2 0 4 5 5	→ \$		2	.00
CHARITY CODE			GIFT AMOUNT		CHARITY CODE			GIFT AMOUNT	

**Thank you for your support of the State Employee Charitable Campaign!**

# The Group Presentation

## The Most Successful Campaign Technique

- ❖ EASIEST WAY TO:
  - ❖ Contact and educate people
  - ❖ Deliver a consistent message
  - ❖ Show the video
  - ❖ Deliver a brochure and pledge card
  - ❖ Have Senior Executive express support
  - ❖ Have agency speaker encourage participation

# PROBLEMS?

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