

SPECIAL EVENT FORM



Date: _____

Contact Name _____ Type of Event (bake sale, walk-a-thon, silent auction, etc.) _____

State Agency/University _____ Division/Institution/Academic Unit _____

Address (required for acknowledgements) _____ City, State, Zip Code _____

Email _____ Daytime Phone _____

PLEDGE INFORMATION

\$ _____ Cash

\$ _____ Check *(Made payable to NC SECC)*

\$ _____ **TOTAL PLEDGE**

PLEDGE DESIGNATION

If you choose to designate your gift, please list the charity code found in the 2009 SECC Giving Guide.
A minimum of \$10 per year, per charity is required for designations.

WE WOULD LIKE TO RECEIVE AN ACKNOWLEDGEMENT OF OUR GIFT FROM THE DESIGNATED CHARITES. YES NO

Charity Code	Charity Name	Annual Contribution (\$)
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

Your SECC contribution is tax deductible to the extent allowed by law. For tax purposes, nothing of substantial value was given in return for this contribution. Please retain a copy of your pledge form and either your cancelled check, credit card statement or year-end payroll deposit slip as proof of your contribution.

DO NOT USE THIS AS AN INDIVIDUAL PLEDGE