



(For SECC Office Use Only)

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ANDAR Acct. #

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2016 SECC Report

CURRENT INFORMATION

Please make the necessary changes at the right.

State Department/University
 Inst/Div/Academic Unit
 Phone
 Mailing Address
 City, State, Zip

Note Corrections Here

State Department/University	
Inst/Div/Academic Unit	
Phone	
Mailing Address	
City, State, Zip	

MAKE A COPY OF THIS REPORT FORM BEFORE SUBMITTING YOUR CAMPAIGN PACKET TO THE SECC OFFICE.

If an individual contributed through payroll deduction and cash, check or credit card, please count the employee only **ONCE** as a contributor in the payroll column. Record the payroll, cash, check or credit card dollar amounts as given.

DO NOT INCLUDE PREVIOUSLY REPORTED or ePledge CONTRIBUTIONS IN THESE TOTALS.

DO NOT USE THIS FORM FOR EVENTS.

DO NOT SEND CASH – EXCHANGE FOR A FREE MONEY ORDER AT YOUR LOCAL STATE EMPLOYEES CREDIT UNION

TYPE OF PLEDGE	NUMBER OF CONTRIBUTORS	COLUMN A Credit Card, Cash & Check Pledges	COLUMN B Payroll Pledges	COLUMN C Total Pledges
Payroll Deduction			Total Payroll \$	Total Payroll \$
Credit Card		Total Credit Card \$		Total Credit Card \$
Cash		Total Cash \$		Total Cash \$
Checks		Total Check \$		Total Check \$
GRAND TOTAL	Total Contributors	Total Credit Card, Cash & Check Pledges \$	Total Payroll Pledges \$	GRAND TOTAL \$

Report prepared by: _____ /_____/_____
 (Please print clearly) (Date) (Phone ####-####-####)

Report audited by: _____ /_____/_____
 (State Employees Combined Campaign Staff) (Date)