



(For SCO Office Use Only)

Envelope # _____ ANDAR Acct. # _____



2011 SECC Report Form

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 CONTRIBUTIONS IN THESE TOTALS

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 Deductions			Total Payroll \$	Total Payroll \$
Credit Card		Total Credit Card \$		Total Credit Card \$
Cash <i>(Exchange for a money order at your local State Employees Credit Union)</i>		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: _____ / _____ / _____
(Signature) (Date) (Phone)

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