

SEFA PLEDGE AND PAYROLL DEDUCTION AUTHORIZATION



PRINT NAME

NYS EEMPLID

AGENCY NAME

DEPARTMENT ID

AGENCY ADDRESS

FCC CODE

CONTRIBUTION METHOD AND AMOUNT

A. PAYROLL DEDUCTION \$30 \$20 \$15 \$10 \$5 \$2 Other: X = \$

B. CHECK (Make payable to SEFA) \$

C. TOTAL CONTRIBUTION (Add A and B) \$

I hereby authorize the State Comptroller to deduct from each paycheck the amount designated above during the year 20__.

I understand that I may revoke or modify this authorization at any time by providing a written request to my agency payroll office.

Signature

Date

Part I: State Agency

SEFA PLEDGE AND PAYROLL DEDUCTION AUTHORIZATION

PRINT NAME

DEPARTMENT ID

AGENCY NAME

DAYTIME PHONE #

AGENCY ADDRESS

FCC CODE

AGENCY ZIP CODE

CONTRIBUTION METHOD AND AMOUNT

A. PAYROLL DEDUCTION \$

B. CHECK (Make payable to SEFA & attach) \$

C. TOTAL CONTRIBUTION (Add A and B) \$

DESIGNATING YOUR GIFT

To designate your gift, find the charity number in the SEFA brochure or by going to www.sefanys.org. Fill in below along with the total amount of your designation. Be sure to include the five digit charity code with the two or three (statewide) digit community code.

SEFA Charity # Total \$ Amount

Optional: I authorize the release of my name, home or email address and amount of my gift to the organization(s) I have designated so they may send me a thank you.

Street or Email Address

City

State: NY Zip Code

If you decide not to designate your gift to a specific charity, leave blank. Your contribution will be distributed to all SEFA charities in your region.

Part II: SEFA

SEFA PLEDGE AND PAYROLL DEDUCTION AUTHORIZATION



NAME

DESIGNATING YOUR GIFT

TOTAL CONTRIBUTION \$

SEFA Charity # Total \$ Amount

METHOD OF PAYMENT Payroll Deduction Check Check #

Part III: Keep For Your Records

For more information go to sefanys.org or call 518-782-SEFA. Your gift to SEFA charities will help your neighbors, your community and your world. Thank you for your generosity.