

GET INVOLVED. Participate. **MAKE A DIFFERENCE.**



Join the **COMMUNITY OF GIVERS** at New Paltz today!

Just 7¢ a day (\$1 a paycheck) to ANY charity of your choice
can make a difference in the lives of those less fortunate

DID YOU KNOW?

Research now shows that giving is good for your health and can result in a longer life!

SEFA – WHAT IS IT AND WHY SHOULD I CARE?

SEFA (State Employees Federated Appeal) is managed by a committee of SUNY New Paltz volunteers. SEFA provides ALL New York State Employees (CSEA, UUP, PEF, COUNCIL 82, etc.) the opportunity to support your choice of local, national and international community services all year long through payroll deduction. Your gift to SEFA helps people cope with the kinds of problems many of us hope we will never have to face (fires, floods, lack of food and shelter) Your generosity is the most effective help.

Your contribution can go directly to the charity of your choice (or charities) of your choice!

HOW DO MY CONTRIBUTIONS WORK?

A pledge for 1 year of:

\$2.00 per payday

Equivalent to:

less than coffee at Starbucks

Will:

Immunize **400** children against 6 diseases

\$5.00 per payday

less than a gallon of gas

16 hours of Helpline assistance for
Alzheimer's and cancer caregivers

\$10.00 per payday

less than one pizza

Provide filtered water to more than
600 people in Tanzania

For our 2012 campaign year, what is most important is to participate — give whatever you can, and together we make a difference!

WHAT'S IN IT FOR ME?

- It feels good to make a difference
- When you pay it forward, you'll know you are spreading good will all year long
- You will automatically be entered into 26 payday raffle prize drawings!

WHAT DO I DO NEXT?

- 1.) Complete the form on the reverse side of this page. (Even if you participated last year, there is no longer a continuous giving option. You need to complete this form each year.)
- 2.) Pick any agency(ies) of your choice by going to www.newpaltz.edu/sefa or www.sefanys.org and click on "Brochures" by county to find the agency code.
- 3.) Return the completed form in the envelope provided by **December 9, 2011**.

Thank you in advance for your support!

If you have any questions call Robin Cohen-La Valle, SEFA Campaign Manager at x3616.

Special thanks to the additional SUNY New Paltz SEFA Committee members:

Lorna Platt, Geralyn Torrone, Sarah Roberson, Maria Cathcart, Don Diamond and Peter Kaufman.

Be part of something good. Please participate.



NEW YORK STATE EMPLOYEE FEDERATED APPEAL PLEDGE AND PAYROLL DEDUCTION AUTHORIZATION



Part I: State Agency Copy

Your Name _____
 Department _____
 On-campus address _____
 Last 4 digits Social Security Number _____
 Federated Code 871

MY CONTRIBUTION METHOD:

A. Payroll Deduction

<input type="checkbox"/> \$20 <input type="checkbox"/> \$15 <input type="checkbox"/> \$10 <input type="checkbox"/> \$5 <input type="checkbox"/> \$3 <input type="checkbox"/> \$2 <input type="checkbox"/> \$1 Other \$: _____	# Pay Periods Per Year	Annual Payroll Deduction	x _____ = \$ _____
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I hereby authorize the State Comptroller to deduct from each paycheck the amount indicated above during the year 2012.

B. Check (Make payable to SEFA and attach) \$ _____

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

WHERE DO YOU WANT YOUR GIFT TO GO?

Part II: SEFA Headquarters Copy

Your Name _____
 State Agency Code 28210 Federated Fund Code 871
 Your Daytime Phone _____

You may designate your gift to any SEFA agency, federation, or community (F.C.C.). Undesignated gifts will be distributed by our local SEFA committee in accordance with state regulations. **See codes in the brochure and indicate below.**

*A complete listing of charities can be found at www.newpaltz.edu/sefa or www.sefanys.org. Click on "Brochures" and you will find the "Sullivan/Ulster" listing on the bottom right, or choose any county you prefer.

CONTRIBUTION METHOD AND AMOUNT:

A. Payroll Deduction \$ _____ **B. Check** \$ _____

Agency Name	SEFA Code #	Annual Amount
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

Part III: Keep for Your Records

Name of Charity(ies) _____

Total Gift \$ _____ Payroll Deduction Check

