

SEBC Charitable Contribution Form

The Southern Employee Benefits Conference (SEBC) is a not-for-profit, tax-exempt, educational organization. It is recognized under the Internal Revenue Code as a 501(c)(3) and 509(a)(2) corporation. All monetary gifts are tax-deductible.

The SEBC has made an effort to keep the Conference dues and program registration fees at a "break even" level. To continue to keep the Conference in good financial condition and keep our meetings and other expenses as low as possible, the Conference now has two ways that members may support the SEBC with tax-deductible contributions. The first, of course, is the Roger Bransford Lecture Series Fund that is a restricted account with a maximum contribution of \$3,000 to be used to help fund the costs for obtaining headline speakers for the Fly-In and Annual Educational Conference. The second is an unrestricted donation to the SEBC for running the Conference and providing more value-added services to the membership.

Donors to either fund will be recognized (if desired) once a year in the *Soupcan* edition that reviews the Annual Educational Conference. The Treasurer of the SEBC is responsible for maintaining these assets in order to ensure the use is for the dedicated purposes.

You will receive a letter acknowledging your tax-deductible donation for tax reporting purposes.

I wish to donate the following:

Roger Bransford Lecture Series Fund

Southern Employee Benefits Conference (unrestricted fund)

Amount enclosed \$ _____

Amount enclosed \$ _____

Checks should be made payable to: Southern Employee Benefits Conference

Should you prefer to make your donation by credit card, please complete the proper section below:

Please mail to:

Southern Employee Benefits Conference
805 S. Glynn Street
Suite 127 PMB 425
Fayetteville, Georgia 30214

or FAX:

(770) 461-8052

Given By: _____

Address: _____

City/State/Zip _____

Phone: _____

E-mail: _____

Credit Cards Accepted:

_____ **Master Card**

_____ **VISA**

_____ **American Express**

_____ **Discover**

Name Embossed on Card: _____

PLEASE PRINT

Card #: _____

Expiration Date: _____

Signature: _____

THANK YOU FOR YOUR SUPPORT OF THE SEBC