

PLEASE USE BALL POINT PEN & WRITE FIRMLY

ATTENTION PAYROLL OFFICES:
Only use this number to identify the local campaign.

CFC Campaign No. _____

PRINT NAME (LAST)	FIRST	MIDDLE INITIAL	FEDERAL AGENCY AND OFFICE	SOCIAL SECURITY NUMBER
<input type="checkbox"/> CIVILIAN <input type="checkbox"/> MILITARY				□ □ □ - □ □ - □ □ □ □
WORK ADDRESS & ZIP CODE				WORK PHONE
				()

CONTRIBUTION: Fill in the blank showing the amount of your payroll allotment, cash or check contribution. Write in the total of your annual contribution in the space provided.

Use the **New FIVE-DIGIT**
CFC Codes Only

ALLOTMENT SOURCE	AMOUNT	INTERVAL	TOTAL GIFT	ANNUAL AMOUNT
MILITARY PAYROLL		X 12 months	\$	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
CIVILIAN PAYROLL		X 26 pay periods	\$	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Other \$ _____ (cash/check payable to CFC)				<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

CFC organizations do not provide goods or services in whole or partial consideration for any contributions made to the organizations via this pledge card.

DESIGNATED GIFT: To designate one or more charities or federated groups that appear on the list provided, fill the charity or federation code(s) and dollar amounts above.

RECOGNITION OPTIONS

I authorize the CFC to release the information I have provided below to the charities I have designated on this pledge form.

Name: _____

Home Address or E-Mail: _____

Pledge Amount: (Check the "Yes" box to release the amount of your pledge(s) to your designated charities.) Yes

PAYROLL DEDUCTION AUTHORIZATION

I hereby authorize any agency of the United States Government by which I may be employed during 2008 to deduct the amount(s) shown above from my pay each pay period during the calendar year 2008 starting with the first pay period that begins in January and ending with the last pay period that begins in December, and to pay the amounts so deducted to the Combined Federal Campaign shown above. I understand that this authorization may be revoked by me in writing at any time before it expires.

SIGNATURE _____ DATE _____

See reverse side for information on volunteer opportunities in your community.

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COPY #2 -- To the Central Receipt Point

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COPY #3 – Contributor - Keep for Personal Tax Records

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Privacy Act Notice

Executive Order No. 12353 authorizes the U.S. Office of Personnel Management to conduct fund raising activities and to establish procedures for collecting information related to such activities.

Executive Order 9397 (November 22, 1943) authorizes the use of the Social Security Number (SSN). This collected information will be disclosed to organizations maintaining the accounting of contributions and to your payroll office.

Additional disclosure may be made to the Department of Treasury to make proper financial adjustments to a court or another agency when the government is party to a suit; and to the Internal Revenue Service and state and local taxing authorities regarding income tax returns.

The furnishing of the SSN, along with other data requested, is voluntary. However, failure to furnish any of the requested information may result in errors or noncompliance with your request for a payroll deduction by your agency.

If you are making a one-time, lump-sum gift and, therefore, not using the payroll deduction method of payment, you are not required to furnish your SSN.

Find a Volunteer Opportunity

The USA Freedom Corps Volunteer Network can help you access service opportunities near your home or office, across the country, or overseas. Just go to www.volunteer.gov, enter geographic information, such as zip code or state, and your area of interest to find out how you can get involved.